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S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	THE RAFAEL FLO	RES FOUNDATION	ON, INC.		<u></u>	
	N24000001245					
DOCUMENT NUMBER:						
The enclosed Articles of Am	endment and fee are sub	mitted for filing.				
Please return all corresponde	ence concerning this matt	er to the following				
JUDITH BURGOSA						
		(Name of Contact	t Person)	<u> </u>		
RAFAEL FLORES FOUND	DATION, INC.					
	- , "	(Firm/ Comp	any)			
11 NE 3RD STREET						
		(Address)			
POMPANO BEACH, FLOR	RIDA 33060					
		(City/ State and Z	ip Code)			
judithburgos69@gmail.com						
E	-mail address: (to be use	d for future annual	report no	otification	i)	
For further information conc	erning this matter, please	e call:				
JUDITH BURGOS			954		274-5905 (Daytime Telephone	
	(Name of Contact Persor	n)	(Area	a Code)	(Daytime Telephone	Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Flori	da Depar	tment of	State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	cate of Status ed Copy ional Copy is	
Mailing A	Address		Street A	ddress	on	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE RAFAEL FLORES FOUNDATION INC.

Name of Corporation as currently filed with the Flo	orida Dept. of State)		<u>.</u>
N24000001245			· · · · · · · · · · · · · · · · · · ·
(Document	Number of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the	following
A. If amending name, enter the new name of the con	rporation:		
RAFAEL FLORES FOUNDATION INC.			The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	" or the abbreviation "Corp." c	_
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	X)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Fl.	orida street address)	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept	the obligations of the position.	
	Signature of New Regist	ered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add		Doc Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee	ng additional A ets. if necessary	Articles, enter change(s) here:). (Be specific)	

· · · · · · · · · · · · · · · · · · ·	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	a data)
Note: If the date inserted in this block does not meet the applicable statutory filing re	

document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
6/17/2024 Dated
Signature Judith Burga
(Bythe chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that (iduciary)
JUDITH BURGOS
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)

2024 JUE 21 - MEET 1.3

Articles of Amendment to Articles of Incorporation of

	V.		
THE RAFAEL FLORES FOUNDATION INC.			202.
(Name of Corporation as currently filed with the Flori	ida Dept. of State)		<u> </u>
N24000001245	-		
(Document N	umber of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For	Profit Corporation adopt	ts the following
A. If amending name, enter the new name of the corp	oration:		÷1.
RAFAEL FLORES FOUNDATION INC.			Tt
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated	or the abbreviation "Coi	The nev rp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered new registered agent and/or the new registered off Name of New Registered Agent:		enter the name of the	
		· 	<u> </u>
New Registered Office Address:	(Fla	rida street address)	
		, Florida	
	(City)	(Zip Code	e)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I a	ered Agent: Im familiar with and accept (he obligations of the posit	tion.
	Signature of New Registe	red Agent, if changing	_

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add	_		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee	ng addition	onal Articles, enter change(s) here: essary). (Be specific)	
	,		

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			<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	<u> </u>		_ _
			. <u>.</u>		
The date of each amendment(s) adoption date this document was signed.	on:			, i	f other than the
Effective date if applicable:	(no more than 90	days after amount	ant file data!		
Note: If the date inserted in this block do				this date will not be l	isted as the
document's effective date on the Departm			o requirements,	4410 11111 1101 00 1	iotea as tite
Adoption of Amendment(s)	(CHECK ONE)				

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
6/17/2024 Dated
Signature Judih Banga
(Bythe chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
JUDITH BURGOS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

2024 July 21 - Aili - 43