

N24 0000003619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

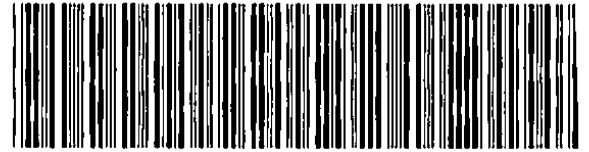
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2024 APR -8 PM 12:28  
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# LATINOS UNITED CORP.,

*A non-profit organization*

March 28, 2024

Attn: Amendment Sections,  
Division of Corporations  
The Centre of Tallahassee  
2415 Monroe St., Suite 810  
Tallahassee, FL 32303

In re: Florida Not for Profit Corporation, LATINOS UNITED INC.  
Document Number: N24000003619

Attn: Amendment Sections,

The purpose of this Amendment is to correct the name of the nonprofit organization registered with the division of corporations as Latinos s United Inc., which is the incorrect name. The name of the nonprofit organization is **LATINOS UNITED CORP.** Please make an amendment o that it may reflect correctly.

If you have any further questions please contact me. I have provided the information below.

Regards,

Mery Lopez Palma  
MLP/mg

Contact by phone at: 305-882-2739

Contact by email at: [mlopez@lopezlawfl.com](mailto:mlopez@lopezlawfl.com)

Please cc and include the following emails: [palma003@gmail.com](mailto:palma003@gmail.com) & [Legal@lopezlawfl.com](mailto:Legal@lopezlawfl.com)

\*\*\* CHECK ENCLOSED/AMENDMENT

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LATINOS UNITED, INC

DOCUMENT NUMBER: N24000003619

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mery Lopez Palma

(Name of Contact Person)

(Firm/ Company)

491 E. Okeechobee Road

(Address)

Hialeah, Florida 33010

(City/ State and Zip Code)

mlopez@lopezlawfl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mery Lopez Palma

561

379-4466

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|---|---|

Mailing Address

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

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

FILED

2024 APR -8 PM 12: 28

LATINOS UNITED, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N24000003619

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

LATINOS UNITED CORP.

*The new*

*name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent: MERY LOPEZ, ESQ.

(Florida street address)

New Registered Office Address:

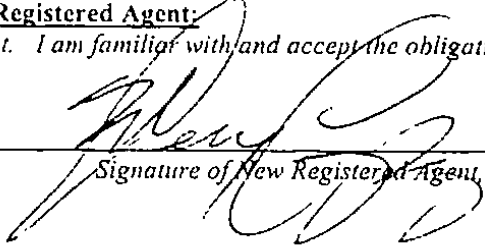
(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

  
Signature of New Registered 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. The 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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Amend Article III to remove any and all lawful business

Amend Article III so that the specific purpose for which this corporation is organized is:

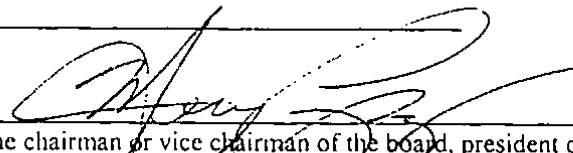
EDUCATE, MOTIVATE & EMPOWER LATINO AMERICANS

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 3/28/2024

Signature

  
(By the 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)

MERY LOPEZ, ESQ.

\_\_\_\_\_  
(Typed or printed name of person signing)

PD

\_\_\_\_\_  
(Title of person signing)