N95000001467

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COVER LETTER

TO: Amendment Section Division of Corporations

PHILIPPINE CULTUNAME OF CORPORATION:	JRAL FOUNDATION INC
N95000001467 DOCUMENT NUMBER:	
	
The enclosed Articles of Amendment and fee are subm	
Please return all correspondence concerning this matte	r to the following:
VIVIAN H. DUDGEON	
	(Name of Contact Person)
PHILIPPINE CULTURAL FOUNDATION INC	
	(Firm/ Company)
14301 NINE EAGLES DR	<u> </u>
	(Address)
TAMPA FLORIDA 33626	
	(City/ State and Zip Code)
INFO@BAYANIHANARTSCENTER.ORG	
E-mail address: (to be used	For future annual report notification)
For further information concerning this matter, please	call:
VIVIAN DUDGEON	813 9251232 at
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy (Additional copy is enclosed) □S52.50 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address

Mailing Address
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

PHILIPPINE CULTURAL FOUNDATION INC

Name of Corporation as currently filed with the Florida N95000001467	V	
	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For Proj</i>	fit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated" or i	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	Σ)	P22 MAY
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		23 PM 1: 50 SSEE. FLANIE
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	fice address in Florida, ente	r the name of the
Name of New Registered Agent:	- X/ X	
New Registered Office Address:	(Florida	street address)
		, Florida
 -	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the c	obligations of the position.

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	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>C</u>	PETERSON, LARI	14301 NINE EAGLES DR TAMPA FL 33626
2) Change Add	<u>C</u>	ARNEL BIGLETE	14301 NINE EAGLES DR TAMPA FL 33626
Remove 3) Change Add Remove	ASST T.	BARUTA, JOSEPH	1208 MAGNOLIA WOODS CT LUTZ FL 33558
4) Change Add	<u>T</u>	UY. LORELEI	14301 NINE EAGLE DR TAMPA FL 33626
Remove 5) Change Add	ASST SI	JANESS, KAMILLE	2051 BAY CEDAR AVE TAMPA FL 33647
 X Remove 6) Change X Add 	ASST SI	SIBAYAN-CRUZ, JENETTE	4922 HI VISTA CIR TAMPA FL 33626
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	PALLAHASSEE.
		NX	PH

8) ADD	ASST TREASURE	R; SANCHEZ-DOWERS, ERLINDA	14301 NINE EAGLES DR TAMPA FL 336	26
<u>-</u>				
				
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he date a	of each amendment ocument was signed	(s) adoption: MAY 15, 2022		_, if other than th
Effective	date <u>if applicable</u> :	MAY 15, 2022		
		(no more than 90 days afte	er amendment file date)	
ote: If to ocument	he date inserted in the 's effective date on the	is block does not meet the applicable s ne Department of State's records.	statutory filing requirements, this date will not l	be listed as the
	of Amendment(s)	(CHECK ONE)		

	5/18/22
Dated	
Signat	ure Twin A Dulga
	(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)
	DUDGEON, VIVIAN F
	(Typed or printed name of person signing)
	VICE CHAIRMAN

(Title of person signing)

FILED
2022 MAY 23 PM 1: 50
PALLAHASSEE, FLEXION

PHILIPPINE CULTURAL FOUNDATION, INC.

14301 Nine Eagles Drive Tampa, Florida 33626 813-925-1232



PROCLAMATION CERTIFICATE OF ELECTED OFFICERS

KNOW ALL MEN BY THESE PRESENTS:

This certifies that the following were duly elected as Executive Officers for the year 2022 to 2024 of the Philippine Cultural Foundation, Inc., in the formula of May, 2022 election and, therefore, entitled to all the rights, privileges, duties, and obligations appertaining thereto:

MR. ARNELL BIGLETE

Senior Vice Chairman (BA	EC) DR. AB/GAI	HAMILTON
Vice Chairman (Phil. Villag	e: MS, V/V/AN	DWGEON
Secretary:	MR. JONATH	AN SIBAYAN
Assistant Secretary:	MS. JENET	TE SUBAYAN -CRUZ
Treasurer:	MS. LORFLE,	I UY
Assistant Treasurer:	MS. ERLINDA	SANCHEZ-BONTA
Auditor:	MR. FRANK	BUTRON
Given this 15th of May, 2022 i	n Tampa, Florida.	
Jather Christian Villagomeza	PCFI ELECTION COMMI	TTEE: Mr. Val Blanco
Chatrperson	About Il	Member
–	Dr. Abreail Hamilton	-

Member

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