

N 96 00000 6454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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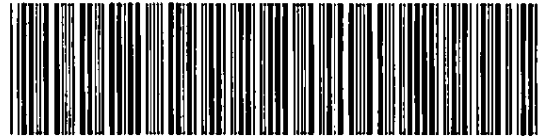
(Business Entity Name)

(Document Number)

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FILED
2017 AUG - 7 PM 12:00
TALLAHASSEE, FLORIDA

C. GOLDEN

AUG - 9 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Casa de Mexico de la Florida Central, Inc.

DOCUMENT NUMBER: N96000006454

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

Please return all correspondence concerning this matter to the following:

Jordan Keller

(Name of Contact Person)

Casa de Mexico de la Florida Central, Inc.

(Firm/ Company)

900 Old England Ave.

(Address)

Winter Park, FL 32789

(City/ State and Zip Code)

Jordankeller@kw.com

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

For further information concerning this matter, please call:

Jordan Keller

954

684-1955

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

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2017

JORDAN KELLER
900 OLD ENGLAND AVENUE
WINTER PARK, FL 32789

SUBJECT: CASA DE MEXICO DE LA FLORIDA CENTRAL, INC.
Ref. Number: N96000006454

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption of each amendment must be included in the document.

You can check only one (1) box for the adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 717A00014313

RECEIVED
17 AUG - 7 PM 2:58
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

Articles of Amendment
to
Articles of Incorporation
of

FILED

Casa de Mexico de la Florida Central, Inc.

2017 AUG -7 PM 12:00

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

N96000006454

(Document Number of Corporation (if known))

TALLAHASSEE, FLORIDA

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:

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)

Casa de Mexico

P.O. Box 560846

Orlando, FL 32856

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: Jordan Keller

900 Old England Ave.

(Florida street address)

New Registered Office Address:

Winter Park

(City)

Florida 32789

(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. 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:

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

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Hugo Hernandez</u>	<u>2567 Porterview Way</u> <u>Orlando, FL 32812</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>M</u>	<u>Juan Sabines Sr</u>	<u></u> <u></u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Lourdes Asca</u>	<u>900 Old England Ave.</u> <u>Winter Park, FL 32789</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Federico Hollander</u>	<u>14901 S. Orange Blossom Trail</u> <u>Orlando, FL 32837</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Jordan Keller</u>	<u>900 Old England Ave</u> <u>Winter Park, FL 32789</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Carlos Kuri</u>	<u></u> <u></u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Article IV - Purpose Section #1

Modify Last Paragraph to end of section 1 to read as follow

"Assisting individuals of Hispanic origin with medical expenses and coordinating resources and services."

The date of each amendment(s) adoption: 5-9-2017, if other than the date this document was signed.

Effective date if applicable: 5-15-2017
(no more than 90 days after amendment file date)

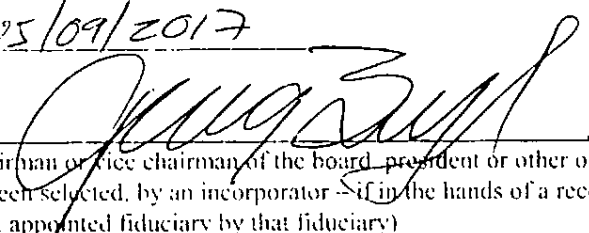
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 05/09/2017

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)

Jorge Becerra Sr.

(Typed or printed name of person signing)

President of the Board

(Title of person signing)