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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: ESTUDIANTES (DE MERIDA F.C. CORP			
DOCUMENT NUMBER	P18000051802	1			
The enclosed Articles of .	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ndence concerning this ma	tter to the following:			
	THAMARA	PEREZ			
		Name of Contact Persor	1		
	TABADESA A	SSOCIATES			
_		Firm/ Company	.		
	419 W 49th ST	SUITE# 111			
_	·	Address	 		
	HIALEAH, FL 33012				
		City/ State and Zip Code	2		
	TAMMYP@TABADE	SA			
		ed for future annual report	notification)		
	2 20014 (10 02 00				
For further information co	oncerning this matter, pleas	e call:			
THAMARA PEREZ		305 at (558-0622		
Name of C	Contact Person	 '	de & Daytime Telephone Number		
Enclosed is a check for th	e following amount made p	ayable to the Florida Depa	rtment of State:		
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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			

Articles of Amendment to Articles of Incorporation of

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ESTUDIANTES DE MERIDA F.C. CORP

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(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000051802	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation: N/A	71
name must be distinguishable and contain the word "corporate" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
D. Unter and mining office address if applicables	N/A
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)	N/A
 If amending the registered agent and/or registered office ade new registered agent and/or the new registered office addres 	
N/A	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:N/A	, Florida
Men registered Office radioss.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	t: 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	P	CHRISTIAN G TONI PENA	1570 NW 82ND AVE
Add			MIAMI, FL 33126
Remove			
2) Change			
Add			
Remove			
3) Change		_	_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	_
Add			
Remove			
6) Change		_	_
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).		

<u> </u>		
<u>-</u>		
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
-		

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4 13 2013 Signature 4 13 2013	
Signature	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
CHRISTIAN G TONI PENA	
(Typed or printed name of person signing)	
PRESIDENTE	

(Title of person signing)