P19 0000173886

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
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04/26/20--01007--017 **

A Mill

AUG 1 1 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BRIDGES CON	MMUNITY SERVICES COR	р —————
DOCUMENT NUMB	ER: <u>P19000073886</u>		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	PABLO HERZBERG		
•		Name of Contact Person	
BRIDGES COMMUNITY SE		ERVICES CORP	
		Firm/ Company	
	1791 W 58 STREET UNIT 5	01	
		Address	
	HIALEAH, FL 33012		
		City/ State and Zip Code	•
	E-mail address: (to be us a concerning this matter, pleas	sed for future annual report se call:	notification)
PABLO HERZBERG		at (_)
Name of Contact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
S35 Filing Fee	☐\$43.75 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)
Ame Divi P.O.	ing Address ndment Section sion of Corporations Box 6327 thassec, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to of

Articles of Incorporation



(Name o	f Corporation as curren	tly filed with the Florida De	pt. of State)
P19000073886			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation;	1006, Florida Statutes, this	s Florida Profit Corporation	adopts the following amo
A. If amending name, enter the new na	me of the corporation:		
	 		The
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "luc," or "Co".	A professional corporation	f" or the abbreviation "Coname must contain the
B. Enter new principal office address, i	f applicable:	1791 W 58 STREET	
(Principal office address <u>MUST BE A ST</u>		UNIT 501	
		HIALEAH FL 33012	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST O		1791 W STREET	
<u></u>	,	UNIT 501	
		HIALEAH FL 33012	
D. If amending the registered agent and new registered agent and/or the new			ame of the
Name of New Registered Agent			
		(rect address)	
New Registered Office Address:	1791 W 58 STREET UNIT 501, HIALEAH		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			ons of the position.
	Signature of New	Registered Agent, if changing	<u> </u>

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and titl 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; Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eac 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, V as Remove E xample :	, and Sal	ly Smith, .	SV as an Add.	
X Change	PT	John Do	<u>oc</u>	
X Remove	\underline{V}	Mike Jo	ones .	
<u>X</u> Add	<u>SV</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	VP		IVONN CANCIO BRITO	1791 W 58 STREET
X Add				UNIT 501
Remove				HIALEAH, FL 33012
2) Change		_		
Add				
Remove Change				
Add				
Remove				
4) Change		 -	***	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
			Page 2 of 4	

E. If amending or adding additional Articles, enter change	<u>(5) u</u>	iere.
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(Attach additional sheets, if necessary). (Be specific)

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provisions for implementing the amend (if not applicable, indicate N/A)	ment if not contained in the amendment itself:
	·
	Page 3 of 4
The date of each amendment(s) adoption:date this document was signed.	, if c
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)

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 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 cast for the amendment(s) was/were sufficient for approval (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. 06/17/2020 Dated Signature (By a director, president or other officer – if directors or officers have not been selected, $\hbar \mathbf{y}$ an incorporator – if in the hands of a receiver, trustee, or other court appointed duciary by that fiduciary)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be

PABLO HERZBERG

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)