## P21000102 140

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Elp/1 Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Familia de Corazo	n Inc		_	
	BER: P21000102140			_	
	s of Amendment and fee are st	abmitted for filing.			
Please return all corre	espondence concerning this ma	itter to the following:			
	Maria C Perez				
	Name of Contact Person				
	Paz Accounting Company				
	Firm/ Company				
	6401 SW 87 Avenue Suite 1	14			
	Address				
	Miami FL 33173				
	City/ State and Zip Code				
	maria@pazaccounting.com				
	E-mail address: (to be us	sed for future annual repor	t notification)	_	
For further information	on concerning this matter, plea	se call:		~	
Maria C Perez		786	900-0729	1022 ACC 29	
Name of Contact Person			/ ode & Daytime Telephone N	umber 5	
inclosed is a check fe	or the following amount made	navable to the Florida Der	partment of State:		
merosca is a eneck it	or the following amount made	payable to the Florida 19c	sartinem or state.		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	3	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 hassee, FL 32303	10	

## Articles of Amendment Articles of Incorporation of

to

Familia de Corazon Inc				
(Name of Corporation	as currently filed with the Florida De	ept. of State)		
P21000102140				
(Documen	nt Number of Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation	adopts the fo	llowing amend	dment(s)
A. If amending name, enter the new name of the corp	oration:			
			The i	new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	or "Co". A professional corporation		reviation "Cor	p.,
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u> )			_
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				_
			022 i	_
				<u> </u>
		<del></del>	<del> </del>	_````
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		ame of the		<u>.</u>
Name of New Registered Agent		_	<del>=</del> ω	المتر.
			. —	
	(Florida street address)	<del> </del>		
New Registered Office Address:	(City)	, Florida	(fin Cods)	_
	(Ciù)		(Zip Couc)	
New Registered Agent's Signature, if changing Registed hereby accept the appointment as registered agent. I am	ered Agent: m familiar with and accept the obligation	ons of the pos	rition.	
. 1	7	, ,		

Signature of New Registered Agent, if changing

Theck if applicable  $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

X Change

Please note the officer/director title by the first letter of the office title:

John Doe

<u>PT</u>

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 Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

iele III Purpose	(Be specific)	
•		
e purpose for which this co	rporation is organized is: Membership Sales.	
<del></del> -		
<del></del>	• •	
		<del></del>
If an amendment provide	s for an exchange, reclassification, or cancellation of iss ting the amendment if not contained in the amendment	sued shares, titself:
(if not applicable, ind	icate N/A)	. III
		· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) ad	December 6, 2021	, if other than the
date this document was signed.	7/1011.	, it offer than the
Decc Effective date <u>if applicable</u> :	nber 6, 2021.	
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requartment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors withou	ut shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes east for ficient for approval.	or the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the ar	
"The number of votes cast f	or the amendment(s) was/were sufficient for approva	I
by	(voting group)	
-	(voting group)	
August 25, 2	022	
Dated	<del></del>	
Signature	400	
(By a dir selected.	ector positient or other officer – if directors or office by an incorporator – if in the hands of a receiver, tru d fiduciary by that fiduciary)	
f	Alberto Delgado.	
-	(Typed or printed name of person signing)	
า	reasurer	
-	(Title of person signing)	