

**121 00000 8766**

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H23000025644 3))



H230000256443ABC-

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet**

To:  
 Division of Corporations  
 Fax Number : (850)617-6380

From:  
 Account Name : SILVAS FINANCIAL SERVICES, L.L.C.  
 Account Number : 120020000100  
 Phone : (305)944-9755  
 Fax Number : (888)401-1914

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

STATE OF FLORIDA  
 TALLAHASSEE, FL

2023 JAN 20 AM 11:25

**FILED**

2023 : 12:20:13

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
 PERFORMING ARTS FLORIDA FOUNDATION INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

((11230000125644 3))

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: PERFORMING ARTS FLORIDA FOUNDATION INC

DOCUMENT NUMBER: N21000008766

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

Please return all correspondence concerning this matter to the following:

CAROLINA LAURSEN

Name of Contact Person

PERFORMING ARTS FLORIDA FOUNDATION INC

Firm/ Company

516 DE SOTO DR

Address

MIAMI SPRINGS, FL 33166

City/ State and Zip Code

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

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 JAN 20 AM 11:25

**FILED**

For further information concerning this matter, please call.

CAROLINA LAURSEN 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

- \$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)

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

Street Address  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

((H23000025644.5))

Articles of Amendment  
to  
Articles of Incorporation  
of

PERFORMING ARTS FLORIDA FOUNDATION INC

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

N21000008766

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation

A. If amending name, enter the new name of the corporation:

PRIMER ACTO FLORIDA FOUNDATION INC

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

FILED  
2023 JAN 20 AM 11:25  
TALLAHASSEE FL  
STATE

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 \_\_\_\_\_

(Florida street address)

New Registered Office Address \_\_\_\_\_, Florida \_\_\_\_\_

(City)

(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*

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11)(e), F.S.

{{H23000025644 3}}

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 P/T 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, P/T as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example:

- Change                    PT     John Doe
- Remove                      V       Mike Jones
- Add                            SV     Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>D</u>	<u>TARICA, NATALIA PAULA</u>	<u>516 DE SOTO DR</u>
<input type="checkbox"/> Add			<u>MIAMI SPRINGS, FL 33166</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>ESPEJO, MARIA CONSTANZA</u>	<u>516 DE SOTO DR</u>
<input type="checkbox"/> Add			<u>MIAMI SPRINGS, FL 33166</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

2023 JAN 20 AM 11:25  
 DEPARTMENT OF STATE  
 MIAMI SPRINGS, FL 33166

**FILED**

((1123000025644 3))

E. If amending or adding additional Articles, enter change(s) here  
*(Attach additional sheets, if necessary). (be specific)*

N/A

---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---

**FILED**

2023 JAN 20 AM 11:25  
CLERK OF THE CIRCUIT COURT  
TALLAHASSEE, FL

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,  
provisions for implementing the amendment if not contained in the amendment itself:  
*(if not applicable, indicate N/A)*

N/A

---



---



---



---



---



---



---



---



---



---



---



---



---

{{1123000025644 3}}

The date of each amendment(s) adoption: 01/20/2023, if other than the date this document was signed

Effective date if applicable: 01/20/2023  
*(no more than 90 days after amendment file date)*

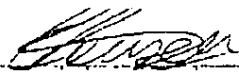
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required
- 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 amendments):*

The number of votes cast for the amendment(s) was/were sufficient for approval  
by \_\_\_\_\_  
*(voting group)*

Dated 01/20/2023

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)

CAROLINA LAURSEN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

STATE DEPARTMENT OF STATE  
TALLAHASSEE, FL  
2023 JAN 20 AM 11:25  
FILED