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## **COVER LETTER**

TO: Amendment Section Division of Corporations

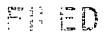
Tallahassee, Fl. 32314

NAME OF CORPORATION: FUNDACION CUL	TURAL VERONICA V	/ILLAMIL	USA CORPORATION
DOCUMENT NUMBER: N21000011389			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.		
Please return all correspondence concerning this mate	ter to the following:		
MANUEL L. CRESPO, ESQ.			
	(Name of Contact Person	on)	
	(Firm/ Company)		
600 BRICKELL AVENUE, SUITE 3600	(4.14)		
	(Address)		
MIAMI, FL 33131			
	(City/ State and Zip Co	de)	
MANNY.CRESPO@GMLAW.COM E-mail address: (to be used	I for future annual repor	t notificatio	n)
For further information concerning this matter, please	call:		
MANUEL L. CRESPO, ESQ.	at _3		789-2770
(Name of Contact Person	1) (2	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Dep	partment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amen Divisi	t Address idment Section of Corpe Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



ISA CORPORATION	<del></del>
da Dept. of State)	2021 SEP 30 PM 12: 42
	SECRETATE
umber of Corporation (if known)	MALL MILESEE, FL
atutes, this <i>Florida Not For Profit Co</i>	rporation adopts the following
oration:	
L USA CORPORATION	The new
poration" or "incorporated" or the ab	obreviation "Corp." or "Inc."
ESS )	
	<del></del>
office address in Florida, enter the	name of the
ice address:	
(Florida street a	ddress)
	, Florida
(City)	(Zip Code)
ered Agent:	
m familiar with and accept the obligat	tions of the position.
Signature of New Revistered Agent	
	imber of Corporation (if known) atutes, this Florida Not For Profit Contration:  L USA CORPORATION  boration " or "incorporated" or the after the after address:  Office address in Florida, enter the active address:  (Florida street a (City)

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 X Remove X Add	PT John Do V Mike Jo SV Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add	<del></del>		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
	<u> </u>		

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	_ / /			
The date of each amendment(s) adontion:	9/29/2	02/		, if other than the
The date of each amendment(s) adoption: date this document was signed.				, n oner man the
Effective date <u>if applicable</u> : (no n	iore than 90 days a	fter amendment file	date)	

<u>Note:</u> 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)

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 9/28/2021
Signature
(By the chairman or vice theirman 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)
Manuel (respo
(Typed or printed name of person signing)
(Title of person signing)
(Title of person signing)