

N020000000210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Take copy of Amend Org was lost
in mail in

Office Use Only



200040205722

08/20/04--01080--004 **52.

CLERK OF STATE
TAMPA, FLORIDA

04 OCT -4 AM 11:15

FILED

Cell Amend

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SLN-HAITI, INC

DOCUMENT NUMBER: H2000010090

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

Please return all correspondence concerning this matter to the following:

JUDE ALCINDOR

(Name of Contact Person)

(Firm/ Company)

19600 NE MIAMI CT

(Address)

MIAMI, FL 33179

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

MAC-KINLEY LAURISTON

(Name of Contact Person)

at (305) 500-7733

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

SLN-HAITI, INC

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

N02000000210

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language: "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE III: PURPOSE (AMENDED)

**THE ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL,
AND/OR SCIENTIFIC PURPOSES UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE.**

ARTICLE VIII DISSOLUTION (ADDED)

**UPON THE DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE
OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(c)(3) OF THE INTERNAL
REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE,
OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, OR TO A STATE OR LOCAL
GOVERNMENT, FOR A PUBLIC PURPOSE.**

(Attach additional pages if necessary)

(continued)

04 OCT -4 AM 11:15
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

The date of adoption of the amendment(s) was: JUNE 23RD, 2004

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 24 day of JUNE, 2004.

Signature

Jude Alcindor

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

JUDE ALCINDOR

(Typed or printed name of person signing)

VICE - PRESIDENT

(Title of person signing)

04 OCT -4 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FILING FEE: \$35