(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:	
·	

Office Use Only



000145111090

03/12/09--01021--012 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations

٠,

NAME OF CORPORATION: LES JEANPA	LINIENS	
DOCUMENT NUMBER: <u>N03000007895</u>		
The enclosed Articles of Amendment and fee ar	e submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
MAXO SINAL		
(Name o	f Contact Person)	
JRP TECH & BUSINESS		
(Fire	n/ Company)	
18800 NW 2 AVENUE, STE	221	
	Address)	
MIAMI, FL 33169		
(City/ Sta	ate and Zip Code)	·
For further information concerning this matter, p	please call:	
MAXO SINAL	at (<u>305</u>) <u>651-00</u>	
(Name of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida De	partment of State:
\$35 Filing Fee	\$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 Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

Articles of Amendment to Articles of Incorporation of

FILED
LUUS MAR 12
SECRETARY OF STATE

LES JE	EANPAULINIE	ENS, INC	CRIDA		
(Name of Corporation as cui	rrently filed with t	he Florida Dept. o	of State)		
	N030000078	95	_		
(Document N	(Document Number of Corporation (if known)				
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of	Incorporation:		For Profit Corporation adopts		
. If amending name, enter the new name	of the corporation	<u>1:</u>			
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"					
3. Enter new principal office address, if a Principal office address <u>MUST BE A STRE</u>					
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF					
D. If amending the registered agent and/or new registered agent and/or the new re			, enter the name of the		
Name of New Registered Agent:					
New Registered Office Address:	(Florid	da street address)	·····		
		(City)	, Florida		
		(City)	(Zip Code)		
lew Registered Agent's Signature, if chang hereby accept the appointment as register osition.			accept the obligations of the		
_	Signature of New	Registered Agent, i	f changing		

	d title, name, and address of each Of	<u>licer and/or Director being ad</u>	lded:
	tional sheets, if necessary)		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	••		
			
(attach add	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spe MEND ARTICLE TO REFLECT zation is organized exclusively for o	rcific) THE FOLLOWING	onal
·			
-	<u>rposes, including, for such purpos</u>		
<u>organizatio</u>	ns that qualify as exempt organizat	tions under section 501(c) (3)
of the Inter	nal Revenue Code, or correspondin	g section of any future fede	ral tax code

The date of each amendment(s) adoption: MARCH 07, 2009			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.		
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.		
Dated_MAI	RCH 9, 2009		
Signature	Fr. Christian Plancher		
hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)		
	CHRISTIAN PLANCHER		
	(Typed or printed name of person signing)		
	CHAIR		
	(Title of person signing)		

Page 3 of 3