

NO40000001773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

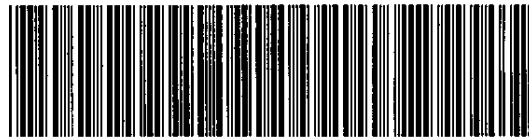
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500185253165

*Name Change &
Amend*

10/04/10--01023--025 **43.75

FILED
2010 OCT -4 AM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*APR
10/6/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Ideal Haitian Community Networking, INC.

DOCUMENT NUMBER: N04000001773

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

Please return all correspondence concerning this matter to the following:

Guy O. Edmond
(Name of Contact Person)

Ideal Haitian Community Networking, INC.
(Firm/ Company)

3600 State Road 7 Suite
(Address)

Mirama Florida, 33023
(City/ State and Zip Code)

edwinguy@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Guy O. Edmond at (786) 406-5577
(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:

- | | | | |
|---|---|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

2010 OCT -4 AM 8:41

Ideal Haitian Community Networking, INC.

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

STATE
TALLAHASSEE, FLORIDA

N04000001773

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this ~~Florida~~ *Non-Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

Ideal Haitian American Community Networking, INC.

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" abbreviation "Corp.,"

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Julienne Dumervil

New Registered Office Address:

3489 Juniper Lane

(Florida street address)

Davie

(City)

Florida 33330

(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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
DR	Carole Saintinord Joachim	18381 NE Miami court Miami Gardens Florida,33179	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: 9/08/2010

(date of adoption is required)

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(s) was/were sufficient for approval.

☐ 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 9/08/10

Signature 

(By the chairman or vice chairman 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)

Guy O. Edmond

(Typed or printed name of person signing)

Director

(Title of person signing)