

N05000001586

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7/28/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ESTIME FOUNDATION

DOCUMENT NUMBER: N05000001586

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

Please return all correspondence concerning this matter to the following:

Fabienne Montpeirous

(Name of Contact Person)

Tortuga Holistic Island

(Firm/ Company)

8395 SW 186 St

(Address)

Cutler Bay, FL 33157

(City/ State and Zip Code)

fabibi22@yahoo.com

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

For further information concerning this matter, please call:

Fabienne Montpeirous

(Name of Contact Person)

at (305) 254 0650

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

ESTIME FOUNDATION INC.

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

N05000001586

(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:

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

Fondation Estime ou la Revolution de 46, Inc.

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.

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:

New Registered Office Address:

(Florida street 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

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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>
T	Ella Laguerre	8395 SW 186 St Cutler Bay, FL 33157	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
T	Fabienne Montpeirous	8395 SW 186 St Cutler Bay, FL 33157	<input checked="" 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)

ARTICLE 2 - PURPOSE OF CORPORATION

Fondation Estime ou la Revolution de 46 (FER46) (SEE ANNEX regarding Haiti's Revolution of 1946) is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Fondation Estime ou la Revolution de 46 (FER46) is organized to contribute financially to the (NGO) FO HAITI VIV's Social Program, more specifically all actions taken by this NGO to support the Tortuga Island native population, at all levels : Job creation, Health, Housing.

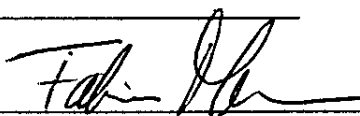
The date of each amendment(s) adoption: 7/25/2011
(date of adoption is required)

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 7/25/2011

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)

Fabienne Montpeirous
(Typed or printed name of person signing)

Treasurer
(Title of person signing)