

NO6000011117

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(Requestor's Name)

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(City/State/Zip/Phone #)

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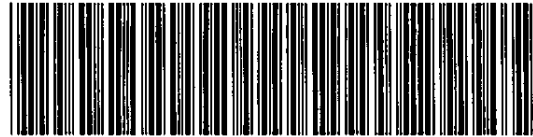
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(Business Entity Name)

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TALLAHASSEE, FLORIDA

*Amel*  
APR 04 2014  
R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** New Horizon For Youth And Families, Inc.

**DOCUMENT NUMBER:** N06000011117

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

Please return all correspondence concerning this matter to the following:

**Paulette Cayo Jean**

(Name of Contact Person)

**New Horizon For Youth And Families, Inc.**

(Firm/ Company)

**13744 Eden Isle Blvd.**

(Address)

**Windemere, FL 34786**

(City/ State and Zip Code)

**newhorizonforyouthandfamilies@usa.com**

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

For further information concerning this matter, please call:

**Paulette Cayo Jean**

(Name of Contact Person)

at (

**321**

(Area Code & Daytime Telephone Number)

**287**

**387- 9243**

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

New Horizon For Youth And Families, Inc.

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

N06000011117

(Document Number of Corporation (if known))

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

N/A

*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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

13744 Eden Isle Boulevard  
Windemere, FL 32786

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:

N/A

(Florida street address)

New Registered Office Address:

(City)

, Florida

(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)*

*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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VC</u>	<u>Paulette Cayo</u>	<u>13744 Eden Isle Blvd</u> <u>Windemere, FL 34786</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VCD</u>	<u>Paulette Cayo Jean</u>	<u>13744 Eden Isle Blvd</u> <u>Windemere, FL 34786</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

### 1. Presentation of the New Branch

Fight-Cancer is one of the major departments of the New Horizon for Youth and Families, Inc., which is a licensed and recognized Non- profit organization in the State of Florida. This particular branch of the organization is designed to serve those who are facing health issues, especially cancer.

### 2. Mission

Fighting-Cancer is a community-based entity, dedicated to the well being of human beings, empowering each individual to be in top of his/her own health. Our Mission is to provide support and encouragement not only to those who are cancer victims and are facing the reality, but also to those who, after being diagnosed with cancer, are still in denial either by fear of the eventual consequences of the disease or by lack of knowledge about the disease process.

### 3. Vision

Fighting-Cancer provides generous service to everyone who wants to acquire more information about how to overcome the fear of cancer and live their lives at the fullest. Fighting-Cancer practices no discrimination. Everyone is welcome without regard to race, color, religion, or national origin. Our vision is to promote early detection through screening and self awareness and gather testimonies from cancer survivors to motivate our population.

## **E. Additional Articles (Continued)**

### **4. Operations/Office**

Fighting cancer will be operated by a committee of 3 to 5 people, which will be functioning under the supervision of the Board of Directors of New Horizon for Youth and Families, Inc. However, this particular branch will have its own internal guidelines. We are currently located in Orlando, Florida. However, our focus is to function in any area where help is needed. Fighting-Cancer will have a separate website but will be linked to the main site of New Horizon for Youth and Families, Inc.

- 4.1 The Fight-Cancer Committee will meet with the Board of Directors twice a year (Every 6 months). Meeting period will be determined consensually between the Board and the Committee.
- 4.2 The Committee will be responsible for planning, implementing, and evaluating all activities related to the functioning of this department.
- 4.3 The Committee will submit all activities proposal to the Board of Directors for analysis and approval before execution. Submission must be done at least 2 months prior due date of the particular activities.
- 4.4 The Committee will submit annually 2 activity reports to the Board of Directors. The second report must be received by the Board prior to the Annual Assembly of the New Horizon for Youth and Families, Inc.
- 4.5 The Committee will have a branch Director who will be serving as the link between the Board of Directors and the Committee.
- 4.6 The Committee has the rights to determine its own meeting schedule according the load of activities that must be accomplished.
- 4.7 The Committee can come up with any fundraising activities that can help this department. However, as for all other activities, the Board of Directors who oversees the Committee has the final decision.

### **5. Members**

Fighting-Cancer has enough room for everybody.

- 1. **Supporters.**- Those who want to support this initiative via their monetary contribution.
- 2. **Beneficiaries.**- Those who have the desire to stay informed about cancer and those who want to share their testimonies to others.

## **6. Funding/Donation**

This department will be funded with the help and donation of generous friends, members or supporters or via activities of fundraising.

- 6.1 All kinds of donation, in-kind or money are welcome and will be tax deductible through the organization 501©3 license.
- 6.2 All donations must be delivered on the name of New Horizon for Youth and Families, Inc. with the mention "For the benefice of Fighting-Cancer"
- 6.3 The department fund will be included in the main account of New Horizon for Youth and Families, Inc. However, the Committee treasurer will keep a record of all amount credited to the main account for Fighting-Cancer.

## **7. Activities**

This list of activities is not exhaustive, but can include the ones mentioned below. Therefore, other actions can be taken according to the needs of our beneficiaries for a particular moment:

- ❖ Counseling /Prevention
- ❖ Seminar on self care
- ❖ Encouragement to seek medical care
- ❖ Orientation regarding where to go after being diagnosed
- ❖ Stress management
- ❖ Family coping
- ❖ Community resources
- ❖ Testimony Sharing

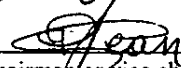
The date of each amendment(s) adoption: March 27, 2014, if other than the date this document was signed.

Effective date if applicable: April 27, 2014  
(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 03-28-2014

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)

**Paulette Cayo Jean**

(Typed or printed name of person signing)

**Vice Chairman / Director**

(Title of person signing)