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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sychar Eglise Adventiste, Inc						
DOCUMENT NUMBER: N0700000703						
The enclosed Articles of Amendment and fee are sub-	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter	er to the following:					
Frantz Nerette						
	(Name of Contact Person	1)				
	(Firm/ Company)					
135 Lainhart Ct						
	(Address)					
West Palm Beach, Florid	da 33409					
	(City/ State and Zip Code	e)				
frnerette@yahoo.						
E-mail address: (to be used	l for future annual report i	notification)				
For further information concerning this matter, please	call:					
Frantz Nerette	_{at (} 561	346-3096 ode & Daytime Telephone Number)				
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)				
Enclosed is a check for the following amount made pa	nyable to the Florida Depa	artment 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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301				

Articles of Amendment Articles of Incorporation of

Sychar Eglise Adventiste, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N07000000703 (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: 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: (Florida street address) New Registered Office Address: 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: X Change X Remove X Add	$\overline{\underline{V}}$ $\overline{\underline{Mik}}$	<u>n Doe e Jones y Smith</u>	·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Member	Marie Evelyne Isidore	9500 N.W 3rd Apt B241
X Add			Boca Raton, Fl 33528
Remove			
2) Change	Member	Fillette Dorceus	4362 Emerald Vista
Add			Lake Worth FI, 33461
X Remove	\		0540 Dilles on Dd
3) Change	<u>VP</u>	Lamarre Jean Claude	6513 Dillman Rd
Add			Greenacres FI 33411
X Remove			
4) Change	Member	Bazin Douyon	1168 Madison Chase Apt 1
XAdd			West Palm Beach, FI 33411
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

	this document was	s signed.	, if other than the
Effe	ctive date <u>if appli</u>	cable:	
		(no more than 90 days after amendment file date)	
Ade	ption of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficie) was/were adopted by the members and the number of votes east for the amendment(s) at for approval.	
	There are no men adopted by the bo	obers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
	Dated	08/01/2014	
	Signature	Frantz Nerette, President Frantz Ver	Sto
	3	(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)	ww
	Fr	antz Nerette	
		(Typed or printed name of person signing)	
	Pr	esident	
		(Title of person signing)	