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(Re	equestor's Name)	
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SECRETARY OF STATE
TALLAMASSEE, FLORED

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COVER LETTER

TO: Amendment Section Division of Corporations		
UNION FO NAME OF CORPORATION: and Huy	r Reconcilia	tim Nation
NAME OF CORPORATION: and Huy	nan Right D	efense in Hu
DOCUMENT NUMBER: NO 70000	7097	
The enclosed Articles of Amendment and fee are submi	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
_ Webento	N. Ple're	
(Name of C	······································	
· · ·	7	
	Company)	
2651 NE 15+	Street	
Bynton Beach (City/State)	FL 3343 and Zip Code)	
Bento 314 E-mail address: (to be used)	or future annual report notification	on)
For further information concerning this matter, please c		
Webenton Perre (Name of Contact Person)	at (561) 541 (Area Code & Daytime	777 (Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Department o	f State:
\$35 Filing Fee \$\ \tag{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 C	,

Tallahassee, FL 32301

Articles of Amendment	
Articles of Incorporation Union for Reconciliation National and Human Right Detence in Halti INC. (Name of Corporation as currently filed with the Florida Dept. of State)	Л
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
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	

Signature of New Registered Agent, if changing

position.

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) Title Type of Action Name Address ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Upon the dissolution of this corporation/organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue code, or the corresponding section of any future federal tax Code, or shall be distributed to the federal government, or to a state or a local government, for a public purpose. (Section 4.6)

• • • •	1 / -
The date of each amendment(s) ac	doption: 0//80/20/0
. ,	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ss.
Dated	1/20/2010
(By the c	chairman or vice chairman of the board, president or other officer of directors been selected, by an incorporator – if in the hands of a receiver, trustee, or
other cou	ort appointed fiduciary by that fiduciary)
<	Webenton Pierre
	(Typed or printed name of person signing)
	Resident
	(Title of person signing)