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## **COVER LETTER**

TO: Amendment Section Qivision of Corporations	
NAME OF CORPORATION: Recycle 4 Haiti Foundation	Inc
DOCUMENT NUMBER: N 1600000 5376	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Carolyn Pompilus (Name discontact Person)	
Recycle 4 Haiti Foundation (Firm/Company)	Inc
694-4A Industrial Dr.	<i>.</i> –
Tailanassee FL 323 10 (City/State and Zip Code)	
E-mail address: (to be used for future annual report notification)	<u> </u>
For further information concerning this matter, please call:	,
Caroly Ponpilus at 954936067 (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:	
\$35 Filing Fee	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

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## Articles of Amendment to

Articles of Incorporation

15 JUL 15 PH 3: 02

Recycle 4 +	-lati found	With Inc	SECRETIME OF
(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of State)	<del></del>
NIDOXX	05376		
	Number of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	er Profit Corporation adop	ots the following
A. If amending name, enter the new name of the corp  Rocycle without a  name must be distinguishable and contain the word "cory "Company" or "Co." may not be used in the name.	Bordors i	oc. d" or the abbreviation "Co	The new orp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	Ess) Callar	A Industraces	rial Dr. 32310
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	694-1 Tallaha	tA Industrial	trialle 32310
D. If amending the registered agent and/or registered new registered agent and/or the new registered of  Name of New Registered Agent:			
New Registered Office Address:	(F	lorida street address)	
		, Florida, <i>(Zip Coo</i>	
	(City)	(Zip Cod	de)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the second of the second	tered Agent: am familiar with and accep	t the obligations of the pos	ition.
	Signature of New Regis	Stered 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	<u>V Mik</u>	<u>n Doe</u> e Jones y <u>Smith</u>	·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Jason Nobbles	161 B Wordbergthe. Valfaraiso, FLB2580
Remove 2) Change Add	<u>UP</u>	Thalika Saintil	1320 Lake ave #309 Tallahassee F1 32310
Remove 3) Change Add	<del></del>	<u> </u>	
Remove 4) Change Add			5 15 UL 15 TANK
Remove  5) Change  Add  Remove	<del></del>		PH 3: 02
6) Change Add Remove			

attach additional sheets, if necessary).	(Be specific)							
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	e date of each amendment(s) adoption: 7-15-15 e this document was signed.	, if other than the
	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ument's effective date on the Department of State's records.	t be listed as the
Ado	option 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.	
<b>X</b>	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 7/15/2013	
	Signature  (By the chairman of 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)	
	Catoly Pompiles (Typed a printed name of person signing)	
	(Title of person signing)	
-	TALLATASSEE FLORIDA	TE JUL 15 PH 3
	OSIDA BOLLET	PH 3: 02

To Whom It May Concern:

July 15, 2015

I Carolyn Pompilus, am the owner of RECYCLE WITHOUT BORDERS, LLC and I give my permission for RECYCLE4HAITIFOUNDATION, INC. to use the same exact name as I am the owner of both the limited liability company and the corporation.

Sincerely,

Carolyn Pompilus