(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Community S	amaritan Support For	God's Children in p
DOCUMENT NUM	IBER: N10000006355		
The enclosed Article	s of Amendment and fee are su	omitted for filing.	
Please return all corr	espondence concerning this ma	ter to the following:	
		da Janvier	
	(Name of	Contact Person)	
	Community Samaritan Su	pport For God's Children	in needs
	(Firm	n/ Company)	
	750 We	herborn Place	
		Address)	
	Otana Ma		
		untain GA 30083 te and Zip Code)	
	(City) Sta	te and Zip Code)	
		amaritan@yahoo.com	
	E-mail address: (to be use	d for future annual report noti	fication)
For further informati	on concerning this matter, pleas	e call:	
Frida Janvier		at (404) 249-3	633
	of Contact Person)		ytime Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departm	nent 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)
	ing Address adment Section	Street Address Amendment Section	n
Divis	ion of Corporations	Division of Corpor	
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Ce Tallahassee, FL 32	

Articles of Amendment to Articles of Incorporation of

FILED

Community Samaritan Support For God's Children In Need, Und 9 (Name of Corporation as currently filed with the Florida Dept. of State ARY OF STATE N10000006355 (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: Community Samaritan Support 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. 750 Wetherborn Place B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Stone Mountain GA 30083 C. Enter new mailing address, if applicable: 750 Wetherborn Place (Mailing address MAY BE A POST OFFICE BOX) Stone Mountain GA 30083 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: Florian Janvier Name of New Registered Agent: 7311 SW 8th Street (Florida street address) New Registered Office Address: North Lauderdale , Florida 33068 (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

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Add	<u>lress</u>	
1)DVP	Erwin Hartmann		Wetzlarest	r 28,	
			35584 Wetzlar C	Germany	
2) DSEC	Lucy Milice		3301 Tarragon	Drive	
, 			Decatur, GA 30	034	
			<u> </u>		
3) DTRS	Herode Jean-Baptiste		7311 SW 8th 9	Street	
<i>-</i> ,			North Lauderdale		
AN EXC. DIR.	Frida Janvier		750 Wetherbo	ore Diese	
4) EXC. DIR.	Triad Garrier		Stone Mountain		
	Davis et de la contra				
5) <u>Com. Dir.</u>	Reynald Janvier		9201 NW 53rd		
			Sunrise, FL 33	351	
6) Dir. Health	Vanessa Bernard		9201 NW 53rd		
			Sunrise, FL 3335	51	
					
If REMOVING	G an officer and/or director, pleas	se list the ti	tle(s) and na	me of the officer/director t	to be
removed:					
Title(s)	<u>Name</u>	Title(s)		<u>Name</u>	
1) DTRS	Frida Janvier	4) BMD		Bertil Demetrius	
2) DVP	Vanessa Bernard	5)			
3) DSEC	Reynald Janvier	6)			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Education Director Loise Larrieux; Address Rue Antenor Firmin # 16
Gonaives Haiti
Fund Raising Bertil Demetrius Address 1049 Crestdale Street
Jacksonville FL 32211
Public Relation Lucy Milice Address 3301 Tarragon Drive Decatur GA 30034
Program Director (USA) Gwen Turner Address 760 Wetherborn Place
Stone Mountain GA 30083
Program Director (HAITI) Joseph Lucien Wildfrid Address Rue Egalite # 20
Gonaives Haiti
Lawyer Jude Jean-Louis is a Board Member address 337 Main Street
Orangen NJ 07050
CPA Donna Bird is a Board Member address 109 S Bulova
Apopka FL 32703
Doctor Marjorie Courtilien is a Board Member address 163 -47 130th Ave apt 5
Jamaica NY 11434
·

The date of each amendmen	t(s) adoption: 10/28/2011
	(date of adoption- required)
Effective date if applicable:	11/01/2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or madopted by the board of directions	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated_10/28 Signature	3/2011
(By	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	er court appointed fiduciary by that fiduciary)
	Florian Janvier
	(Typed or printed name of person signing)
	Dresident
	(Title of person signing)

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