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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	usiness Entity Nar	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Hosanna Haitian C	Church of Fort Myers	
DOCUMENT NUN	1BER: N11000002171		
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	Bon-Ami, Herard Rev.		
		Name of Contact Perso	n
		Firm/ Company	
	1941 Courtney Drive Suite #		
	Fort Myers, FL 33901	Address	
		City/ State and Zip Cod	e
hera	ysabelle@yahoo.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Bon-Ami, Herard Ro	ev.	at (223-6756
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2017

HERARD BON-AMI 1941 COURTNEY DR., STE 2 FT MYERS, FL 33901

SUBJECT: HOSANNA HAITIAN CHURCH OF FORT MYERS INC.

Ref. Number: N11000002171

We have received your document for HOSANNA HAITIAN CHURCH OF FORT MYERS INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

**** NEW NAME OF CORPORATION ****

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 517A00008466

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed with the Florida Dept, of State)
Josanna Haitian Church of Fort Myers, Inc.	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
and the Discouling Inc	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc." or "Co". A professional corporation name must contain the bbreviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDE</u>	<u>RESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9
D. If amending the registered agent and/or register- new registered agent and/or the new registered (office address.
Name of New Registered Agent	
	(Florida street address)
-	
1 Office Address	, Florida
New Registered Office Address;	(City) , Florida, Code)
New Registered Agent's Signature, if changing Reg Thereby accept the appointment as registered agent.	(City) (Zip Code)

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	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	S	Marthe Boisrond	4729 Sw 28th Street
X Add			Lehigh Acres, FL 33973
Remove			
2) Change	<u>V</u>	Rev.Caleb Bon-Ami	12312 Adventure Drive
X Add			Riverview FL, 33579
Remove	Advisor	Ludovic LaRoche	13180 N Cleveland Ave Suite 126
X Add			North Fort Myers, FL 33903
Remove			
4) Change	As. Trea	Miluna Bernadel	3675 Broadway #K3
X Add			Fort Myers, FL 33901
Remove			
5) Change	Member	Erventha Lausisn Jean	3008 Santa Barbara Blvd #B
X Add			Lehigh Acres, FL 33914
Remove			
6) X Change	Member	Bon-Ami, Isabelle	2310 SE 8th PL
Add			Cape Coral, FL 33990
Remove			

ADD	
71717	Sec. Carmel Delisma 5017 Bauer Street Lehigh Acres, FL 33973
provis	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself: f not applicable, indicate N/A)
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The date of each amendment(s)	adoption:	_, if other than the
date this document was signed.		
Tree		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 20 days after amenament fue date)	
	block does not meet the applicable statutory filing requirements, this date will not h	oe listed as the
document's effective date on the	Department of State's records.	
Adoption of Amendment(s)	(CHECK ONE)	
_		
The amendment(s) was/were was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) oval.	
There are no members or me adopted by the board of directions.	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
03/22/20)17	
Dated		
c 7	/	
Signature	n. Ami Herard Rex	
	hairman or vice chairman of the board, president or other officer-if directors	_
	been selected, by an incorporator - if in the hands of a receiver, trustee, or	
other cou	urt appointed fiduciary by that fiduciary)	
Bon-z	Ami, Herard Rev.	
	(Typed or printed name of person signing)	
Presid	Jent	
	(Title of person signing)	