

N11000002474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

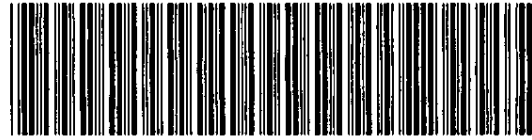
(Business Entity Name)

(Document Number)

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2013 MAR -1 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*Amend NC*

MAR 4 2013

T. LEWIS

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **ENFANTS DU QUISQUEYA INC**

DOCUMENT NUMBER: **N11000002474**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**BETHANIA, BEAUBRUN**

(Name of Contact Person)

(Firm/ Company)

**441 S STATE RD 7 9D**

(Address)

**Margate, FL 33068**

(City/ State and Zip Code)

**Bethaniabeaubrun@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Bethania Beaubrun**

(Name of Contact Person)

at ( **954** ) **604-8330**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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 Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 15, 2013

BETHANIA BEAUBRUN  
441 S. STATE RD 7, 9D  
MARGATE, FL 33068

SUBJECT: ENFANTS DU QUISQUEYA INC  
Ref. Number: N11000002474

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

DOCUMENT MUST BE SIGNED BY AN OFFICER ON THE LAST PAGE.

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.

Darlene Connell  
Regulatory Specialist II

Letter Number: 913A00003866

RECEIVED  
13 MAR - 1 AM 8:13  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

ENFANTS DU QUISQUEYA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N11000002474

(Document Number of Corporation (if known))

FILED  
2013 MAR -1 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

ONE HEART ORPHANAGE HOME 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.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

441 S STATE RD 7 9D

Margate, FL 33068

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:

BEAUBRUN, BETHANIA

5502 Parade Place

(Florida street address)

New Registered Office Address:

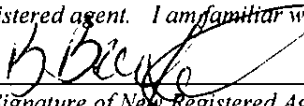
Margate

(City)

Florida 33063  
(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, 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>F</u>	<u>BEAUBRUN, BETHANIA</u>	<u>5502 Parade Place</u> <u>Margate, FL 33063</u>
2) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>CF</u>	<u>MATHILDE, MAIGNAN</u>	<u>16557 BRAMBLEWOOD LN</u> <u>WOODBRIEDGE VA 22191</u>
3) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>TR</u>	<u>SABINE, MOISE</u>	<u>1850 HAMMOCKS BVLD</u> <u>COCONUT CREEK FL 33063</u>
4) ____ Change ____ Add <input checked="" type="checkbox"/> Remove	<u>DIR</u>	<u>RACHAME, FRANCOIS</u>	<u>310 BISHOP RD</u> <u>LAUDERDALE LAKES FL</u> <u>33168</u>
5) ____ Change ____ Add <input checked="" type="checkbox"/> Remove	<u>TR</u>	<u>PAULA, THEOPHILE</u>	<u>145 RUE NERVA, WAYNE 93</u> <u>WAYNE 93 CARRFOUR HT</u>
6) ____ Change ____ Add <input checked="" type="checkbox"/> Remove	<u>C</u>	<u>GERSON, PETIGNY</u>	<u>441 S STATE RD 9C</u> <u>MARGATE FL 33168</u>

[illegible]

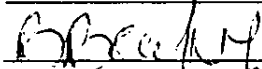
The date of each amendment(s) adoption: 01/10/2013

Effective date if applicable: 02/06/2013  
(no more than 90 days after amendment file date)

Adoption 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.
- ☒ 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 02/05/2013

Signature   
(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)

BETHANIA, BEAUBRUN

(Typed or printed name of person signing)

FOUNDER & EXECUTIVE DIRECTOR

(Title of person signing)