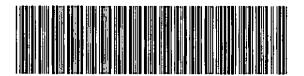
N12000003303

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2022 HAR 16 AM II: OR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	First Haitian Comm	unity Church Inc			
DOCUMENT NUMBERS	N12000003303				
The enclosed Articles of A					
Please return all correspond	lence concerning this mat	ter to the following:			
Frantz Gaudard					
		(Name of Contact Pe	erson)		
Church					
	- 1 - 1	(Firm/ Company	. دا		
PO Box 2595					
		(Address)			······································
Belle Glade FL 33430					
		(City/ State and Zip	Code)		
sefanfan@yahoo.com					
	i-mail address: (to be use	d for future annual rep	oort notificatio	n)	
For further information con	cerning this matter, please	e call:			
Frantz Gaudard			561	985-3331	20
	(Name of Contact Persor	1)	(Area Code)	(Daytime Telep	hone vimbert
Enclosed is a check for the	following amount made p	ayable to the Florida I	Department of	State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	& \$52.5 Certif s Certif (Addi Enck	0 Filing Fee icate of Status ied Copy tional Copy is osed)	2022 HAR 16 All 11: 06

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

First Haitian Community Church, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N12000003303 (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: First Haitian Community Church of God, Inc. 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: (Florida street address) New Registered Office Address: , Florida (City) (Zin 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 (Terk, 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 F. 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove	******		
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional shee		onal Articles, enter change(s) here: essary) (Be specific)	
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The date of each amendment(s) ado date this document was signed.	option: August 15, 2021	_, if other than the
Immir	fiately	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)	

.

Dated	02/28/2022
Dated	
Signatu	
	(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)
	Frantz, Gaudard
	(Tunad or aristad sums of a sum i
	(Typed or printed name of person signing)