N130000008794

| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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15 APR 21 AM 7: 56

CV'S

COVER LETTER

Division of Corporations INTERNATIONAL ENTERPRISE AND CHILDREN SERVICES, INC NAME OF CORPORATION: N13000008796 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dieula Louis (Name of Contact Person) (Firm/ Company) 5443 NW Wisk Fern Cir (Address) Port St Lucie, FL 34986 (City/ State and Zip Code) internationalenterpriseservices@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

| Donnie Clark | 561 |
|---|-----|
| • | |

_{at},561 ,309-1358

(Name of Contact Person)

TO: Amendment Section

(Area Code & Daytime Telephone Number

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

□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & Certificate of Status Certified Copy

(Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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

Articles of Amendment to Articles of Incorporation of

15 APR 21 AH 7:56

| INTERNATIONAL ENTERPRISE AND CHILDREN SERVICES, INC. | |
|--|--|
| (Name of Corporation as currently filed with the Florida Dept. of State) | |
| N1300008796 | |

| (Document Number of Co | poration (if known) |
|--|---|
| Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation: | , this Florida Not For Profit Corporation adopts the followi |
| A. If amending name, enter the new name of the corporation | o <u>n:</u> |
| | The ne |
| name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name. | on" or "incorporated" or the abbreviation "Corp." or "Inc. |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| (Mining dadress MAY BE A POST OFFICE BOX) | |
| | |
| | |
| D. If amending the registered agent and/or registered office | |
| new registered agent and/or the new registered office ac | dress: |
| Name of New Registered Agent: | |
| | Florida street address) |
| New Registered Office Address: | TO MA SIFEE GRADESS |
| | , Florida |
| (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered A lereby accept the appointment as registered agent. I am fan | Agent: illiar with and accept the obligations of the position. |
| | |
| Signature of New I | Pagistarad Agant if changing |

Page 1 of 4

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 | PT John D V Mike J SV Sally S | <u>Iones</u> | |
|----------------------------------|---|---------------------|----------------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | JOSEPH,KETIA | Delmas 19, Port-Au Prince, Haiti |
| Add X Remove | | | Delmas 01509 HT |
| 2) Change | D | BORDLEY, GRACE | 1952 Rio Mar |
| Add X Remove | | | Port St Lucie, Fl 34952 |
| 3) Change | D | COVARRUBIAS, BENITO | 5710 Seagrape Dr |
| Add X Remove | | | Ft Pierce, FL 34982 |
| 4) Change | D | BRUNACHE, MARIE R | 1902 Oleander Blvd |
| Add X Remove | | | Ft. Pierce, FL 34950 |
| 5) Change | D | ESPERANCE, WISMICK | 3066 Cr Smith St 704 |
| Add X Remove | | | Orlando, FL 32805 |
| 6) Change | TD | DONNIE CLARK | 912 21ST Street |
| X Add | | | Fort Pierce, FL 34950 |
| Remove | | | |

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 <math>PTD.

Changes should be noted in the following number. 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</u> <u>Mik</u> | n Doe te Jones y Smith | |
|-----------------------------------|---------------------|------------------------------|-----------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | SD | VIVIAN MIMS | 912 N 21st Street |
| X Add | | | Fort Pierce, FL 34950 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 51 Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Ammend: Article III - Purpose Clause Said corporation is organized exclusively for charitable purposes within the meaning of section 501C(3) of the Internal Revenue Code of 1986 (or corresponding section of any future Federal tax code). Add: Article IX - Dissolution Clause Upon dissolution of this corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986 (or corresponding section of any future Federal tax code) or shall be distributed to the Federal, State or Local Government for a public purpose.

| | date of each amendment(s) this document was signed. | adoption: | SCORE LARY 15 CLASSIF other than the BIVISION OF CONTRACTOR |
|------|---|--|---|
| Effe | ective date <u>if applicable</u> : | (no more than 90 days after am | 15 APR 21 AM 7: 57 endment file date) |
| Ado | option of Amendment(s) | (<u>CHECK ONE</u>) | |
| | The amendment(s) was/were was/were sufficient for appro | adopted by the members and the number aval. | of votes cast for the amendment(s) |
| | There are no members or me adopted by the board of dire | mbers entitled to vote on the amendment ctors. | (s). The amendment(s) was/were |
| | Dated Janua Signature | ary 02, 2015 | |
| | (By the ch have not l | airman or vice chairman of the board, probeen selected, by an incorporator – if in the transpointed fiduciary by that fiduciary) | |
| | Dieula Lo | ouis , | |
| | | (Typed or printed name of person sign | ning) |
| | Presiden | t/Director | |
| | | (Title of person signing) | |