## N1300000890D

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12/23/14 (PRM) 12/23/14

## **COVER LETTER**

ent Section of Corporations

NAME OF CORPORATION: ORGANISAtion des Haitieus Volontaire pour **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: 52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) 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

des Desmunis

01	
DRGANISATION DES HAITIENS VOLONTAIRE POUR L'EDUCATION	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N1300008900	
(15)	

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, the amendment(s) to its Articles of Incorporation:	his Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:  THERNATIONA ADVANCEMENT  name must be distinguishable and contain the word "corporation"  "Company" or "Co." may not be used in the name.	+ Relieb FOR the POOR The new
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5860 GRAND CANYON DR ORLANDO, FL 32810
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS Principal Address
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional agent and agent:	
New Registered Office Address:  DALAN DO (City)	Florida 32810 (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am fortility	A /
	elof4

TILEU 14 DEC 17 AM 9: 32 SECRETARY OF STATE SECRETARY OF STATE

## 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	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	PRES		5860 GRAND CANYON DR DRLANDO, PL 32810
Remove 2) Change Add	VP		1505 STANBURY DR ORLANDO, Th 30818
Remove  3) Change Add Remove	ADV	HERVE SAINT-LOUIS	1525 Stanbury Dr DRLANDO, PL 32818
4) Change Add	TRE		N 3125 TWISTED OAK CH ORLANDO, PL 32808
S) Change Add	VD	JUNIOR MALIVERT	7641 TELFORD CT ORLANDO, FL 32818
6) Change Add	SEC	KADIDJA EDMOND-N	MALIVERT 7641 TELFORD CT DRLANDO, FL 32818
Remove		Page 2 of 4	UNCONVEY, 12 SOUTH

JIMMY ROMAIN Title ORLANDO, FL.

SEATRICE VAlles Delegate Adjoint Address 5860 canyon

ORLANDO, PL

ORLANDO, PL

ORLANDO, PL

ORLANDO, PL

ORLANDO, PL

32810

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
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<del>*************************************</del>	
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The date of each amendment(date this document was signed.  Effective date if applicable:	S) adoption: December 5th, 2014, if other than the December 5th, 2014 (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of d	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	(2/7/14)
(By the have n	chairman on the mair nan of the board, president or other officer-if directors of been selected by an incorporator — if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
<del></del>	(Typed of printed name of person signing)
	PRESIDENT (Title of person signing)