N150000 11256

(Reque	stor's Name)	-				
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(Address)						
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(City/St	ate/Zip/Phone	e #)				
PICK-UP] WAIT	MAIL				
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Certified Copies	Certificates	s of Status				
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Special Instructions to Filir	ig Officer:					
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Office Use Only



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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Christian Haitian Or	phan Professional Dev	relopment of J	eremie Inc'
DOCUMENT NUMBER:	N15000011256	· 	, 	
The enclosed Articles of Am	nendment and fee are subr	nitted for filing.		
Please return all corresponde	ence concerning this matte	er to the following:		
Charles Rene				
 		(Name of Contact Per	rson)	
Christian Haitian Orphan Pr	rofessional Development o	of Jeremie Inc		
		(Firm/ Company))	
6813 Sunset Strip				
		(Address)		
Sunrise, FL 33313				,
		(City/ State and Zip C	Code)	
charlrene@gmail.com				
E	-mail address: (to be used	for future annual repo	ort notification	1)
For further information conc	erning this matter, please	call:		
Charles Rene		at	954	816-8130
	(Name of Contact Person			(Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida D	epartment of	State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A	Address	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Christian Haitian Orphan Professional Development of Jeremic Inc

(Name of Corporation as curren	tly filed with the Florid	a Dept. of State)
N15000011256 :		.
(Document Numb	er of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For	Profit Corporation adopts the fo
A. If amending name, enter the new name of the corporati	on:	·
House of Hope 4 Children Inc		•
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated"	or the abbreviation "Corp." or
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	·=
	<u> </u>	21
		<u></u>
C. Enter new mailing address, if applicable:	21/4	***
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
D. If amending the registered agent and/or registered office	e address in Florida, e	nter the name of the
new registered agent and/or the new registered office a		
Name of New Registered Agent: N/A	······································	
	(Flor	nda street address)
New Registered Office Address:		•
	•	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent	
I hereby accept the appointment as registered agent. I am fai		ne obligations of the position.
	•	
	ignature of New Register	red Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and ti 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; (Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, Pi 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 Do Mike Jo Sally Si	<u>ines</u>				·	
Type of Action (Check One)		<u>Title</u>		<u>Name</u>				<u>Addres</u> s	
1) Change	•		_	N/A					
Add						4			•
Remov	e						•		-
2) Change			 -						
Add					•				
Remov	'e								<u> </u>
3) Change	e								<u> </u>
Add									27/2 26 - 10 27
Remov	e								22
4) Change	<u>:</u>								<u> </u>
Add									<u> </u>
Remov	e	•							
5) Change	:		_			,		·	
Add									-
Remov	re								
6) Change	!								
Add									
Remov	'e								

E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)			•
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N/A				
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09/01/2019
The date of each amendment(s) adoption:i
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.
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 09/01/2019
Signature Charles Leve
(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)
Charles Rene
(Typed or printed name of person signing)
Fin. Officer
(Title of person signing)