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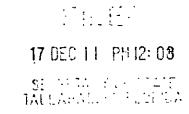
TO: Amendment Section . Division of Corporations

Tallahassee, FL 32314

DOUZE CHILI NAME OF CORPORATION:	DREN FOUNDATION.	INC.		
N1600000832 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Rodrigue Ade				
1 N 10	(Name of Contact 1	erson)		
	(Firm/ Compar	ny)		
6981 NW 6 Street				
	(Address)			_
Plantation FI 33317				
	(City/ State and Zip	Code)		
dcfhaiti@gmail.com				
E-mail address: (to be	used for future annual re	port notification	n)	
For further information concerning this matter, pl	ease call:			
Rodrigue Ade	а	954 L	600-1212	
(Name of Contact Pe		(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made	de payable to the Florida	Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	e & □\$43.75 Filing Feature Certified Copy (Additional copy enclosed)	Certif is Certit	0 Filing Fee ficate of Status fied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address mendment Sect ivision of Corpo lifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



DOUZE CHILDREN FOUNDATION, INC.

(Name of Corporation as	currently filed with the Flor	rida Dept. of State)
N16000000832		
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
Haitian Children Foundation, Inc.		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not he used in the name.	orporation" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u>X</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new		, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	ı (F	lorida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept	t the obligations of the position.
	Signature of New Regis	tered 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: X/Change X/Remove X/Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Exec D	Dr H. Claude Douze	6981 NW 6 Street
x Add			Plantation, Fl 33317
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

(attach additional sheets	, if necessary).	(Be specifi	c)				
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The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
	22, 2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment.	ent(s)
There are no members or members adopted by the board of directors	bers entitled to vote on the amendment(s). The amendment(s) was/wors.	ere
Dated	·	
Signaturo a f	-25	
(By the chair have not be	rman or vice chairman of the board, president or other officer-if direction en selected, by an incorporator — if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
Rodrigu	e Ade	
	(Typed or printed name of person signing)	_
SD		
	(Title of person signing)	_