N17000001188

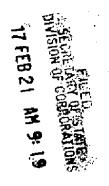
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Hantan-American So	ocial Workers Associati	on, Inc.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subr			-
Please return all correspondence concerning this matter	er to the following:		
Perpetue K. Augustin			
	(Name of Contact Pers	on)	
HASWA, Inc.			
	(Firm/ Company)		
4222 Inverrary Blvd, Apt. 4418			
	(Address)		
Lauderhill, FL 33319			
	(City/ State and Zip Co	de)	
haswainc@gmail.com			
E-mail address: (to be used	for future annual repor	t notification	1)
For further information concerning this matter, please	call:		
Perpetue K. Augustin	at		338-7312
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida De	partment 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 used)
Mailing Address Amendment Section		t Address	
Division of Corporations		idment Secti ion of Corpo	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Haitian-American Social Workers Association, Inc.		7 3
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	- (48)
N17000001188		· ·
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporat	ien:	
N/A		The nev
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	N/A	
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.		ic .
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
<u></u>	, Florid	а
	(City) (Zip	Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fair	Agent: niliar with and accept the obligations of the	position.
S	gnature 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 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)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	AM	Dyna Ceme	4222 Inverrary Blvd,
Add			Apt. 4418
Remove			Lauderhill, FL 33319
2) Change	Mark	Walna Calixte	4222 Inverrary Blvd,
Add			Apt. 4418
X Remove			Lauderhill, FL 33319
3) X Change	PF	Perpetue K. Augustin	4222 Inverrary Blvd
Add		-	Apt. 4418
Remove			Lauderhill, FL 33319
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(anach additional sheets, if necessary). (Be specific)
The purpose of this corporation is:
• To promote the quality and effectiveness of social work practice for Haitian American Social Workers through services
to individuals, groups, and communities.
• To further the broad objective of improving condition of life for the Haitian American community through utilization of the
professional knowledge and skills of social work and to expand through research the knowledge necessary to define and
attain these goals.
• To provide opportunities for Haitian American to work in unity toward maintaining and promoting high standards of
practice, to share and promote ideas and interests, and to become effectively involved with the issues and services relevant
to the needs of the community.
• To formulate a program designed to attain its several objectives and use its resources to maintain consistently a sound
balance and integration of its general and special activities.
In furtherance and not in limitation of such purposes, the corporation shall have the power to:
Encourage continued education and sponsor education projects and conferences relevant to the social needs in the
community.
Enforce the Code of Ethics for Haitian-American social workers.
• Interpret to the community the contribution of social work in the community's social needs.
Participate in international social welfare activities and cooperate with foreign social workers.

E. If amending or adding additional Articles, enter change(s) here:

		02/01/2017	
	e date of each amen e this document was :		, if other than the
Eff	ective date <u>if applic</u>	02/01/2017 able:	
		(no more than 90 days after amendment file date)	
No:	te: If the date inserte ument's effective da	ed in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	be listed as the
Ad	option of Amendme	nt(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no membadopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
	Dated	02/01/2017	
	Signature	*Cugusti	
		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)	
		Perpetue K. Augustin	
		(Typed or printed name of person signing)	
		President & Founder	
		(Title of person signing)	