## N170000007346

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Document Number)		
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R. WHITE APR 1.5 2019

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2019

GILBERT FRANCOIS 401 DOVE DR KISSIMMEE, FL 34759

SUBJECT: JHADSA ORG INT .CORP.

Ref. Number: N17000007346

We have received your document for JHADSA ORG INT .CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The statement of change of registered agent cannot be used to amend the officers/directors. Please see the enclosed articles of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 119A00006140

Rebekah White Regulatory Specialist III

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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	الريان على المساور المالية الم
	of _	0 2019 APP 15 PM
lmfa	Cra Int.	2019 APR 15 PH 6: 05
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
	107346	
	nt Number of Corporation (if k	known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable	: 401 bo	Ve OR
(Principal office address MUST BE A STREET ADI	KISS IN	Ve OR 1149 ec Fl 34758
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or registe new registered agent and/or the new registered		, enter the name of the
Name of New Registered Agent:		
— New Registered Office Address:	d	Florida street address)
_	(City)	, Florida (Zip Code)
	(Cu))	(zap code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	zistered Agent: I am familiar with and accep	of the obligations of the position.
	Signature of New Regi.	stered 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u></u>	JEANNOT Petit FreRe	
Add Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	C	WILNER AtHOURISTE	
Add Remove 3 ) Change	S	Gold Man Marie Beause Jun	
Add Remove	<del></del> _	0	
4) ChangeX Add	<u>C</u>	CLARKARMY LOUIS JEUNE	
Remove  5) Change	_\$_	Marie Adeline B. Coldmi	A-
Add			
6) Change	<u>T_</u>	Marie Kettery Bear Brun	
Remove			

If amending or additional shed	ng additional Ai	ticles, enter ch	ange(s) here:			
(antien naumona sne	em, y necessary).	(ise apecagic)				
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The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file da	te)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for was/were sufficient for approval.	or the amendment(s)
There are no members or members entitled to vote on the amendment(s). The amend adopted by the board of directors.	ment(s) was/were
Dated 5-3-19	
Signature House & Bankun	
(By the chairman or vice chairman of the board, president or other have not been selected, by an incorporator – if in the hands of a reother court appointed fiduciary by that fiduciary)	
t Dail	<del></del>
(Typed or printed name of person sign	ing)
President / CEO	
(Title of person signing)	

the