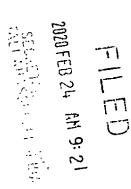
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	JHADSA ON:		·	
	N17000007346			
DOCUMENT NUMBER:				
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matte	er to the following:		
GILBERT FRANÇOIS				
		(Name of Contact Per	rson)	
JHADSA				
		(Firm/ Company)	
401 DOVE DR				
		(Address)		· · · · · · · · · · · · · · · · · · ·
KISSIMMEE FLORIDA	3475 9			
		(City/ State and Zip C	Code)	
francoisgilbert2017@gmail	.com			
E	-mail address: (to be used	for future annual rep	ort notification	1)
For further information conc	erning this matter, please	call:		
GILBERT FRANCOIS		at j	305	600 8533
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida E	Department of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing A			eet Address	
Amendment Section		Amendment Section Division of Corporations		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

JHADSA ORG INT .CORP

*	
(Name of Corporation as currently filed with the Flori	ida Dept. of State)
N17000007346	7/24 62 6
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida St	tatutes, this Florida Not For Profit Corporation adopts the followi
amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corp	oration:
JHADSA COR!"	The ne
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable:	401 DOVE DR KISSIMMEE FLO 3475
(Principal office address MUST BE A STREET ADDRI	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	401 DOVE DR KISSIMMEE FLO 3475
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	fice address:
Name of New Registered Agent:	BERT FRANCOIS
	(Florida street address)
New Registered Office Address:	
	KISSIMMEE Florida 34759 (City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: am familiar with and accept the obligations of the position.
	eQ
- 1	Signature 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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change × Add	CEO	GILBERT FRANCOIS	401 DOVE DR KISSIMMEE FLO
Remove			
2) × Change Add	<u>S</u>	MARIE ADELINE B. GOLDMAN	401 DOVE DR KISSIMMEE FLO
Remove 3)	Γ	MARIE KETTELY BEAUBRUN	401 DOVE DR KISSIMMEE FLO
4) × Change × Add	TR	CLACK ARMY LOUIS JEUNE	4400 DEXEL AVE ORLANDO F
Remove			
5) Change Add			
Remove			
6) Change Add			
E. If amending or additional sheet		Page 2 of 4 icles, enter change(s) here: (Be specific)	
			

	
	
	
	
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Page 3 of 4	
02/17/2020	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
(no more man 20 days uper unenumem pre uner	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da	te will not be listed as the
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.

	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were poard of directors.
Dated	02/17/2020
Signatu	rc —
S	(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)
	GILBERT TRANCOIS (Typed or printed name of person signing)
	CEO TEO

(Title of person signing)