## NIS000000613

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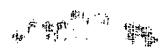
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MAR S. B. SOUR

## **COVER LETTER**



**TO:** Amendment Section Division of Corporations

2010 HAR 26 34 80 10

NAME OF CORPO	RATION: EVOLUTION D'H	AITI-USA INC.	, 	
DOCUMENT NUM	BER:		2.00	
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	EDSON ST CYR			
	·	Name of Contact Person	n	
	EVOLUTION D HAITI-USA	A INC		
		Firm/ Company		
	14317 SW 274TH STREET	This Company		
	***************************************	Address		
	HOMESTEAD, FL 33032			
		City/ State and Zip Cod	e	
edso	nstcyr@evoh.fr			
********	. •	sed for future annual report	notification)	
	•	•	,	
For further information	on concerning this matter, pleas	se call:		
EDSON ST CYR		.786	5433293	
Name	of Contact Person	at ( Area Co	de & Daytime Telephone Number	
Name	of condict i cison	Aica Co	de de Daytille Telephone Pulloci	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Ameno	Address Iment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
	lahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of



EVOLUTION D'HAITI-USA INC.

(Name of Cornoration as curren	tly filed with the Florida Dept. of State)		
N18000000613			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(		
A. If amending name, enter the new name of the corporation:			
EVOLUTION D HAITI-USA INC	The new		
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	14317 SW 274TH STREET		
(Principal office address MUST BE A STREET ADDRESS)	HOMESTEAD, FL 33032		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	14317 SW 274TH STREET		
	HOMESTEAD, FL 33032		
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	dress in Florida, enter the name of the ss:		
Name of New Registered Agent			
(Florida s	street address)		
	,		
New Registered Office Address:	(City) , Florida (Zip Code)		
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	<u>it:</u> r with and accept the obligations of the position.		

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 <math>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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title		Name	Address
1) Change	CFO		PETIT-FRERE AVEZOU	18 VISCOUNT DR
Add X Remove				ROCHESTER, NY 14623
2) Change	PM		CASAME ARNAUD	70 LONG BEACH RD
Add				HEMPSTEAD, NY 11550
X Remove				
3) Change		_		
Add				
4) Change		_		
Add Remove				
5) Change	***********			
Add				
Remove				
6) Change	<del></del>	_		
Add				
Remove				

<u>f amend</u> Attach <i>ac</i>	l <mark>ing or adding additional Ar</mark> dditional sheets, if necessary).	ticles, enter change (Be specific)	e(s) here:		
Emplo	yer Identification Number	82-4074986			
			•	· · · · · · · · · · · · · · · · · · ·	
		***************************************	*	· · · · · · · · · · · · · · · · · · ·	
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<u>provisio</u>	endment provides for an exc ons for implementing the am not applicable, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation tained in the amend	n of issued shares, dment itself:	
	<del></del>				······································

The date of each amendment(s) a date this document was signed.	doption:,	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not epartment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
3/19/2018	×	
Dated	0.44	
Signature		
(By a d	lirector, president or other officer – if directors or officers have not been ad, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	
	EDSON ST CYR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	