N 1900000 6207

Name)
<u> </u>
ip/Phone #)
VAIT MAIL
ntity Name)
Number)
ertificates of Status
icer:





900334314059

09/16/19--01011--005 **43,75



Manc Chs

OCT 0 1 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassec, FL 32314

ORGANIZ. NAME OF CORPORATION:	ATION CHRETIENS	NE D'AIDE HUMAN	SITAIRE ET ENVIRONMENTALE D
DOCUMENT NUMBER: N19000006207			
The enclosed Articles of Amendment and fee	e are submitted for fil	ing.	
Please return all correspondence concerning	this matter to the follo	owing:	
	MAXO	SINAL	
	(Name of C	ontact Person)	
	(Firm/	Company)	
	18800 NW 2ND	AVENUE, SUITE 2.	21
	(Ac	ldress)	
	MIAMI GARD	ENS, FL 33169	
	(City/ State	and Zip Code)	
	MAXOSINAL	~	
E-mail address: (t	o be used for future a	nnual report notificat	ion)
For further information concerning this matter	r, please call:		
MAXO SINAL		305 at	308-8229
(Name of Conta	ct Person)	(Area Cod	c) (Daytime Telephone Number)
Enclosed is a check for the following amount	t made payable to the	Florida Department	of State:
☐ \$35 Filing Fee ☐ \$43.75 Filin Certificate o		Copy Ce al copy is Ce (Ac	2.50 Filing Fee rtificate of Status rtified Copy Iditional Copy is closed)
Mailing Address Amendment Section Division of Corporations		Street Addres Amendment So Division of Co	ection

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ORGANIZATION CHRETIENNE D'AIDE HUMANITAIRE ET ENVIROMENTALE D'HAITI, INC.

(Name of Corporation as curren	<u>itly filed with the Flo</u>	rida Dept. of State)
N190000	06207	
(Document Numb	er of Corporation (if k	tnown)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
ORGANISATION CHRETIENNE D'AIDE HUMANITAIR	E ET ENVIRONNEM	ENTALE D'HAITI, INC. The new
name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name.	tion" or "incorporate	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2019
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		enter the name of the
Name of New Registered Agent:	····	
New Registered Office Address:	éF	lorīda street address)
		, Florida
	(Ciţy)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		the obligations of the position.
	Signatura of None Bogic	stored 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 Do V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change			
Add		·	
Remove 4) Change			
Add			
Remove 5) Change			
Add Remove			
6) Change			
Add			
Kemave			

E. If amending or adding additional A (attach additional sheets, if necessary)). (Be specific)			
		•		
	_			· · · · · · · · · · · · · · · · · · ·
				
The state of the s			 	
				
				

The	date of each amendment(s) adoption:	, if other than the
late	this document was signed.	
effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will rument's effective date on the Department of State's records.	not be listed as the
۸d٥	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated SEPTEMBER 5, 2019	
	Signature IMide Silot	
	(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)	
	IMIDE PHANOR JILOT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	