

N19434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

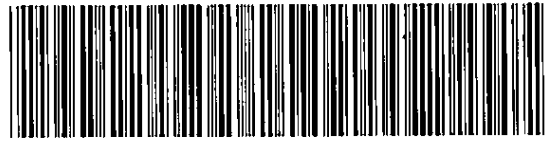
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MAY 17 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LITTLE HAITI HOUSING ASSOCIATION INC.

DOCUMENT NUMBER: N19634

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SAMUEL DILLER

(Name of Contact Person)

LITTLE HAITI HOUSING ASSOCIATION INC.

(Firm/ Company)

181 NE S2ND STREET

(Address)

MIAMI, FLORIDA 33138

(City/ State and Zip Code)

SDILLER@HAITIANAMERICANCDC.ORG

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAM DILLER

786

230-3779

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|--|---|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

LITTLE HAITI HOUSING ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N19631

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

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 MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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:

| | | |
|-----------------|-----------|--------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u> |
| <u>X</u> Remove | <u>V</u> | <u>Mike Jones</u> |
| <u>X</u> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|---|--------------|-----------------------------|--|
| 1) <u>X</u> Change <u> </u> Add <u> </u> Remove | <u>VP</u> | <u>MARIA PASCAL-DANIELS</u> | <u>301 SW 86TH AVE #107</u> <u>PEMBROKE PINES, FL 33025</u> |
| 2) <u>X</u> Change <u> </u> Add <u> </u> Remove | <u>P</u> | <u>FRANTZ ELOI</u> | <u>68 NW 39TH STREET</u> <u>MIAMI, FL 33142</u> |
| 3) <u>X</u> Change <u> </u> Add <u> </u> Remove | <u>S</u> | <u>FELIPE MALO</u> | <u>8931 SW 57TH TERRACE</u> <u>MIAMI, FL 33137</u> |
| 4) <u>X</u> Change <u> </u> Add <u> </u> Remove | <u>T</u> | <u>RAMSES ISMAEL</u> | <u>7523 SW 8TH STREET</u> <u>N. LAUDERDALE, FL</u> |
| 5) <u> </u> Change <u>X</u> Add <u> </u> Remove | <u>D</u> | <u>RAMON RODRIGUEZ</u> | <u>2121 N BAYSHORE FRIVE</u> <u>MIAMI, FL 33137</u> |
| 6) <u> </u> Change <u>X</u> Add <u> </u> Remove | <u>D</u> | <u>NICKLOAS JIMENEZ</u> | <u>290 SUNRISE DR, #206</u> <u>KEY BISCAYNE, FL 33149</u> |

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

(attach additional sheets, if necessary). (Be specific)

| | | | |
|-----|----------|--------------|------------------------------|
| ADD | DIRECTOR | HUBERT CESAR | 5825 NW 5TH COURT, MIAMI, FL |
|-----|----------|--------------|------------------------------|

| | | | |
|-----|----------|-----------------|----------------------------------|
| ADD | DIRECTOR | MICHELLE CILLEN | 12305 NE 2ND AVENUE, N MIAMI, FL |
|-----|----------|-----------------|----------------------------------|

| | | | |
|--|----------|------------|--------------------|
| | DIRECTOR | SAM DILLER | 181 NE S2ND STREET |
|--|----------|------------|--------------------|

The date of each amendment(s) adoption: July 13, 2017, if other than the date this document was signed.

Effective date if applicable: JANUARY 1, 2018
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date 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.
- ☐ 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 5-7-2018

Signature [Signature]
(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)

Franz Eloi
(Typed or printed name of person signing)

BOARD PRESIDENT
(Title of person signing)