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TO: Amendment Section Division of Corporations

AME OF CORPORATION: ENTRAIDE FLORIDIENNE, INC.	
OCUMENT NUMBER: N20000006635	
he enclosed Articles of Amendment and fee are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
LEX CARRU	
(Name of Contact Person)	
NTRAIDE FLORIDIENNE, INC.	
(Firm/ Company)	
82 NE 77TH STREET	
(Address)	
IIAMI, FLORIDA, 33138	
(City/ State and Zip Code)	
ontact@entraidefl.org	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	MAS EN
LEX CARRU 786 554 8170	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	1
nclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)	TO THE STATE OF

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

Street Address
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

Name of Corporation as currently filed with the Fle v20000006635	orida Dept. of State)		
		· · · · · · · · · · · · · · · · · · ·	
(Document Number of Corporation (if known)			
cursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts the	following
. If amending name, enter the new name of the co	rporation:		
			The new
ame must be distinguishable and contain the word "c Company" or "Co." may not be used in the name	orporation" or "incorpor	ated" or the abbreviation "Corp." o	r "Inc."
Enter new principal office address, if applicable			
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)		
	4 1111		
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u>x</u>)		
			
. If amending the registered agent and/or register	ed office address in Flor	ida, enter the name of the	
new registered agent and/or the new registered of	office address:		
Name of New Registered Agent:			
		(Florida street address)	
New Registered Office Address:			<u>.</u> : :
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Regi	istered Agent:		
hereby accept the appointment as registered agent.		ept the obligations of the position.	
	Signature of New Re	gistered Agent, if changing	į i

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 Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change X Add	<u>P</u>	ALEX CARRU	782 NE 77TH STREET MIAMI, FL. 33138
Remove 2) Change Add	<u>P</u>	FRED BERNERD	102 NE 91ST STREET MIAMI SHORES, FL, 33138
X Remove 3) Change X Add Remove	VP	FRED BERNERD	MIAMI SHORES, FL, 33138
4) Change Add	VP	ALEXANDRINE MALFANTI	2453 SE 15TH STREET POMPANO BEACH, FL, 33062
X Remove 5) Change Add			2023 SE
Remove 6) Change Add			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			

						
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The date of each amendment(s) adopted this document was signed.	tion:	<u> </u>	<u> </u>		_, if other t	than the
Effective date if applicable:	(no more than 90 de					
	(no more than 90 de	ays after amendr	nent file date)			
<u>Note:</u> If the date inserted in this block document's effective date on the Depart	does not meet the appli tment of State's record	icable statutory f s.	iling requirements	s, 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 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	AUGUST 27TH, 2023			
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)			
	FREDERIC BERNERD			
	(Typed or printed name of person signing)			
	VICE PRESIDENT			
	(Title of person signing)			

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