## N20849

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION	Le Jardin Communi		<del></del>		
DOCUMENT NUMBER:	N20849				
The enclosed Articles of Am	nendment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this mate	ter to the following:			
Hernan Hernandez					
	·	(Name of Contact I	erson)	<del> </del>	
Le Jardin Community Cente	er, Inc.				
		(Firm/ Compar	ny)		
311 NE 8th Street Suite 203					
		(Address)			_
Homestead FL 33030					
		(City/ State and Zip	Code)		_
hhernandez@lejardinecinc.c	org				
E	-mail address: (to be used	for future annual re	port notification	1)	
For further information conc	erning this matter, please	call:			
Hernan Hernandez		2	305	245 7299	
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)	_
Enclosed is a check for the fi	ollowing amount made p	ayable to the Florida	Department of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	€ \$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	Priling Fee cate of Status ed Copy ional Copy is sed)	

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 Flo	orida Dept. of State)	
(Decument	Number of Corporation (if kn	
(Document	Number of Corporation (if kn	iown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name	orporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable;		
(Principal office address MUST BE A STREET ADD		
	<del></del>	
C. Enter new mailing address, if applicable:	V I	
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
D. If amending the registered agent and/or register		enter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
	(Fle	orida street address)
New Registered Office Address:		
		Fla-i-ta
	(City)	, Florida (Zip Code)
		//
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	stered Agent:	the abliqueious of the marities
i nereby accept the appointment as registered agent.	сын затшаг жил ала ассері	ine obligations of the position.
<del></del>	Signature of New Registe	ared tooms if abouting

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 V SV	John Do Mike Jo Sally Sr	nes	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change Add		-		
Remove				
2) Change Add	-	_		
Remove 3) Change Add Remove		-		
4) Change Add		-		
Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or adding (attach additional sheet	addition s. if neces	nal Artic (sary)	eles, enter change(s) here: (Be specific)	
Under Article 3 Section 3.	2 Numbe	r: Electic	on Tenure Early Head Start Program	
we added policy council c	hair to se	rve as a r	epresentative for EHS Grantee Program.	
We also added under Artic	le 3 Sect	io <u>n 3.2 N</u>	lumber: Election Tenure Head Start and	
and Early Head Start Prog	ram Poli	cy Comn	nittee Chair to serve as	
a representative for Head !	Start and	Early He	ad Start Delegate Program	-:

The date of each amendment(s) adoption:  April 18, 2017  It this document was signed.  If each this document was signed.  If each other than the date if applicable:  In on more than 90 days ofter amendment file date.)  Note: If the date inserted in this block does not ment the applicable statutory filing requirements this day will not be listed as the		
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Effective date <u>if applicable;</u> (no more than 90 days after amendment file date)	ine date of each amendment(s) adoption:	, if other than the
	iate this document was signed.	
	Effective date it applicable:	
	(no more than 90 days after amendment file dat	e)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

Dated	December 11, 2020
Signat	and the state of t
aigilai	(By the chairman of 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)
	Virginia Aponte
	(Typed or printed name of person signing)

(Title of person signing)