N21000006491

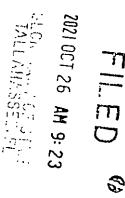
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900368851519

07/01/21--01010--017 **35.00



C. BRUMBLEY NOV - 8 2021

KSC1,7

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		"COUER D'ESPOIR, I	INC.		
	N21000006491				
DOCUMENT NUMBER:					
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following:			
Shirley Auxais					
		(Name of Contact Pe	rson)		
Notary By Shirl, Inc.					
		(Firm/ Company)		
3850 S University Drive, #	291662				
		(Address)			
Davie, FL 3332					
		(City/ State and Zip C	Jode)		
shiri@notarybyshirl.com					
I	E-mail address; (to be use	d for future annual rep	ort notificatio	n)	
For further information con	cerning this matter, please	e call:			
Shirley Auxais		21	954	945-4600	
	(Name of Contact Persor	1)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida I	Department of	State:	
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee Jeate of Status Jed Copy Jeonal Copy is Josed)	
Mailing .			eet Address	f	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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	Florida Dept. of S	State)		
HEART OF HOPE "COUER D'ESPOIR, INC. (N	21000006491)			
(Docun	nent Number of Cor	poration (if known)		
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes, this <i>F</i>	lorida Not For Profit Corporation	adopts the following	
A. If amending name, enter the new name of the HEART OF HOPE "COEUR D'ESPOIR", INC.	corporation:		The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporation" or 2	"incorporated" or the abbreviation	i "Corp." or "Inc."	
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>				
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new registered Agent: 			9: 23	FILED
<u> </u>	3850 S University	Drive, 291662	······································	
New Registered Office Address:		(Florida strvet address)		
	Davie	, Florid		
	(City)	(Ziq.	o Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	t. I am familiar wi	•	•	
_	Shirley R	Tuyais of New Registered Agent, if changi	ng	

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 De V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) <u>*</u> Change Add	<u>P</u>	JEAN-BAPTISTE, KERLINE	
Remove			
2) <u>× Change</u> Add	<u>VP</u>	DAPHNIS, HALLAN	
Remove 3) Change Add Remove			
4) Change Add			
Remove 5)ChangeAddRemove			
6)ChangeAddRemove			
		cles, enter change(s) here: (Be specific)	
			

		
		
		
		
		
	B1087137 75 Apt - PC-4	
The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:		
(n	to more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not but of State's records.	e listed as the
Adoption of Amendment(s)	<u>CHECK ONE</u>)	
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

Dated	06/23/2021
Signatu	(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)
	KERLINE JEAN-BAPTISTE
	(Typed or printed name of person signing)
	President