N23000005794

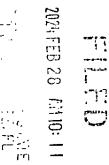
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TO: Amendment Section Division of Corporations

FAMILY ORIENTATION SERV	ICES INC
N23000005794 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	g.
Please return all correspondence concerning this matter to the follow	ving:
QUINNCY AUGUSTE	
(Name of Co	ntact Person)
FAMILY ORIENTATION SERVICES INS	
(Firm/ Co	ompany)
5975 WEST SUNRISE BLVD STE 208 A	
(Add	ress)
PLANTATION FL 33313	
(City/ State as	nd Zip Code)
quinneya@hotmail.com	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter, please call:	
QUINNCY AUGUSTE	754 2462756 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the F	Horida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$4	opy Certificate of Status

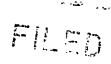
Mailing Address

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



CARIBBEAN FAMILIES ORIENTATION AND PREVENT	TION SERVICES INC.		
(Name of Corporation as currently filed with the Florida I		2024 FEB 28	E: In- Li
N23000005794			10. 11
(Document Number	er of Corporation (if known)		- 37 37 2
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit</i>	Corporation ado	pts the followin
A. If amending name, enter the new name of the corporate FAMILY ORIENTATION SERVICES INC	ion:		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the	abbreviation "C	
B. Enter new principal office address, if applicable:	QUINNCY AUGUSTE		
(Principal office address MUST BE A STREET ADDRESS	5975 WEST SUNRISE BLV	D STE 208 A	
	PLANTATION FL 33313	•	
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 new registered agent and/or the new registered office a		he name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida stre	et address)	
		. Florida	
	(City)	(Zip Cod	de)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: niliar with and accept the obli	gations of the pos	ition.
Si	gnature of New Registered Ag	ent, 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:

tAttach 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: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally S	ones	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
l) Change Add				
Remove				
2) Change Add		-		
Remove Change Add Remove		_		
4) Change Add				
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or additional sheet			icles, enter change(s) here: (Be specific)	
Article 3. Paragraph I				
This organization is orga	inized exc	lusively	for charitable, educational, and scientific pu	rposes, including for such purposes
the making of distribution	ns to orga	ınization	that qualify as exempt organizations describ	ed under Section 501(c)(3) of the
		-	ection of any future federal tax code.	

Article 3. Paragraph II Upon the dissolution of the organization, assets shall be distributed for one or more	exempt purposes within the meaning of
Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any fu	ture federal tax code, or shall be
distributed to the federal government, or to a state or local government, for a public	purpose. Any such assets not disposed
of shall be disposed of by a court of competent jurisdiction in the country in which	the principal office of the organization
is then located, exclusively for such purposes or to such organization or organizatio	ons, as said Court shall determine, which
are organized and operated for such purposes.	
The date of each amendment(s) adoption: date this document was signed.	if other than th
Effective date if applicable: (no more than 90 days after amendment)	file data)

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

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 Signature Signature O2/06/2024 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)				
QUINNCY AUGUSTE				
(Typed or printed name of person signing)				
PRESIDENT				

(Title of person signing)