ND7000 010 969

(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



600331908146

forms,

19 OCT 28 AM II: 08

T SCHROEDER

COVER LETTER

.

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	WORLDY	1EWS 1	NITER	NATIONAL	NC
DOCUMENT NUMBER:	N07000C	10964	-		
The enclosed Articles of Amendment	and fee are submitted for	filing.			
Please return all correspondence conce	rning this matter to the fo	ollowing:			
CHRIST	OPHIER COC) K.F.			_
	(Name o	f Contact Person	1)		
WORLDY	IENS INTA	KNATI	onial	INC	
	(Fir	n/ Company)			
15021 N	SAXON CI	RCLE			
	(Address)			
SOUTHN	EST RANCH	IRS FL	ORIDA	33331	
		ate and Zip Code			
CB CO	OKEW COM	CAST·N	ド ア		
E-mail add	ess: (to be used for futur	e annual report i	notification)		
For further information concerning thi	s matter, please call:				
MAX PXICE		at	305 -	215-3523	
MAX PLICE_ (Name of	Contact Person)	(Ar	rea Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the following a	mount made payable to	the Florida Depa	irtment of St	ate:	
☐ \$35 Filing Fee ☐ \$43.7 Certif	icate of Status — Certifi	ed Copy ional copy is	Certifie Certifie	onal Copy is	
Mailing Address			Address	n	
	Amendment Section Amendment Section Division of Corporations Division of Corpor P.O. Box 6327 Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	VTERNATIONAPL INC ly filed with the Florida Dept. of State)
NO70000109	4
(Document Number	64 r of Corporation (if known)
ursuant to the provisions of section 617,1006, Florida Statutes mendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts the following
. If amending name, enter the new name of the corporation	on:
NA	The ne
ame must be distinguishable and contain the word "corporate Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc.
3. Enter new principal office address, if applicable:	15021 N SAXON CIKCLE
Principal office address <u>MUST BE A STREET ADDRESS</u>)	SOUTHWEST RANCHES FLORINA 33331
	FLORINA 33331
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a Name of New Registered Agent:	ddress:
<u>Name of New Registered Agent</u> .	
New Registered Office Address:	(Florida street address)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for	Agent: miliar with and accept the obligations of the position.
	ignature of New Registered Agent, 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;

(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 V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add Remove	<u> </u>	PHILIP N. NICHOLAS	PEMBROKE PINES FLORIDA 33026
2) Change Add _★_ Remove	<u>D4S</u>	DAVIA HUNES	CORAL SPRINGS FLORINA 33143
3 } Change Add Remove			
4) Change Add Remove			0CI 28 MILLS
5) Change Add Remove	-		
6) Change Add			

. If amending or adding additional Art: (attach additional sheets, if necessary).	(Be specific)						
	- <u>-</u> -			-		-	
							_
							
						-	
				<u>-</u>			
	 _		 				_
			<u>-</u>	· <u>-</u>			_
	 						_
				<u>.</u>			_
		 				-	
							_
							_
							
				<u> </u>			
							
					<u> </u>		_
					- :::;.		_
					1.50	19	
	<u>-</u>				<u> </u>	\circ	
	<u>.</u>					i	_
					3.7	82	7
		Dogo Fof 1			7	, Stree	
		Page 3 of 4			70	80:11M	"ILED
					STATE	··	J
					Ð.	3 C	

The date of each amendment(s) add late this document was signed.	ption:	, if other than the
-	カレソ 19 , 2019 (no more than 90 days after amendment file date	
	(no more than 90 days after amendment file date	ע)
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing required artment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes east for	r the amendment(s)
☐ There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendments.	nent(s) was/were
Dated	JULY 19,2019	
(By the chair	nan or vice chairman of the board, president or other on selected, by an incorporator – if in the hands of a reconstruction is the board, president or other the bands of a reconstruction.	
	ppointed fiduciary by that fiduciary)	cerver, address of
	CHRISTOPHER B COOK (Typed or printed name of person signin	E
	(Typed or printed name of person signif	ng)
	SIRECTOR & VICE PRE (Title of person signing)	516 ENT
		19 A(1)
		8 28
		FILED 19 OCT 28 AHII SECONDOS STATEMENTS