

ND8000004210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

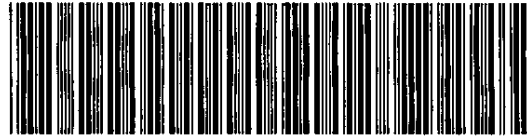
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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01/14/14--01006--006 \*\*35.00

14 FEB -6 PM 5:22  
SECRETARY OF STATE

APPROVED  
AND  
FILED

C. LEWIS  
JAN 22 2014  
EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 22, 2014

ROMAINE BROWN, ESQ. / LAW OFFICE OF ROMAINE BROWN PA  
8551 W. SUNRISE BLVD SUITE 300  
PLANTATION, FL 33322 US

SUBJECT: COUNCIL OF THE UNIVERSE INC.  
Ref. Number: N08000004210

We have received your document for COUNCIL OF THE UNIVERSE INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

You must have a suffix at the end of the name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 614A00001468

THE LAW OFFICE OF  
**ROMAINE BROWN, PA**  
ATTORNEY AND COUNSELOR AT LAW

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8551 W. Sunrise Blvd. Suite 300  
Plantation, Florida 33322

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Email:romainebrown1@gmail.com

FAX: (877) 793-1193  
www.barristerbrown.com

February 4, 2014

PERSONAL AND CONFIDENTIAL  
INTENDED FOR ADDRESSEE ONLY

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

SUBJECT: COUNCIL OF THE UNIVERSE INC. Amended Name Change  
Ref. Number: N08000004210

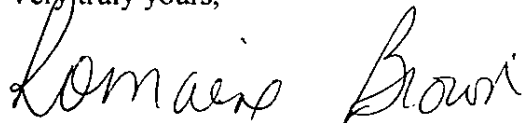
Dear Florida Department of State,

I hope this correspondence is finding you well. This letter is to inform you that we received your letter in regards of typographical error found in the entity name. Please be advised that we are sending you the corrected document to your office for review. We would appreciate the courtesy of a response to this letter. The new name of the Florida Non For Profit is Integrative Society of Universal Sciences, Inc.

Please if you have any questions do not hesitate to call our office at (954) 315-1160.

Thank you for your attention to this matter.

Very truly yours,

  
ROMAINE BROWN, ESQ.

Letter NO 614A00001468

Articles of Amendment  
to  
Articles of Incorporation  
of

APPROVED  
AND  
FILED

14 FEB -6 PM 5:22

SECRETARY OF STATE

Council of the Universe, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N08000004210

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Integrative Society of Universal Sciences, Inc.

The new

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Arvilla Woodington

6410 Aberfoyle Avenue

Cocoa, FL 32927

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>DORIS LARSON</u>	<u>870 CROSS LAKE DRIVE</u> <u>MELBOURNE, FL</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>CTO</u>	<u>PHILLIP DELONG</u>	<u>5971 BROKEN BOW LN</u> <u>PORT ORANGE, FL 32127</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CFO</u>	<u>LATOYA HARRISON</u>	<u>1018 IVERSON AVENUE</u> <u>NASHVILLE, TN 37216</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>COO</u>	<u>CHRISTINE PARK</u>	<u>5287 SW 183RD AVENUE</u> <u>MIRAMAR, FL 33029</u>
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CEO</u>	<u>ARVILLA WOODINGTON</u>	<u>6410 ABERFOYLE AVE.</u> <u>COCOA, FL 32927</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

[illegible]

The date of each amendment(s) adoption: 01/01/2014 APPROVED  
AND  
FILED if other than the date this document was signed.

Effective date if applicable: 01/01/2014  
(no more than 90 days after amendment file date) 14 FEB 6 PM 5:22

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

1/1/2014

Signature

Romaine Brown

(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)

**ROMAINE BROWN, ESQUIRE**

(Typed or printed name of person signing)

**ATTORNEY FOR CORPORATION AS INCORPORATOR**

(Title of person signing)