NO80000/1321

(Red	questor's Name)	
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(City	//State/Zip/Phon	e #)
	☐ WAIT	
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Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	

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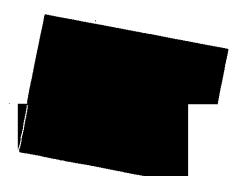


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Amns

OF THE CORPORATIONS



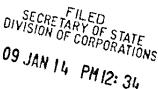
T. Roberts JAN 2 2 2009

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: KIDZ WORL	D FOUNDATION CORPORAT	TION
DOCUMENT NUMBER	: N08000011321		
The enclosed Articles of A	Amendment and fee a	re submitted for filing.	
Please return all correspor	ndence concerning thi	s matter to the following:	
GREGOR'	Y CAMPBELL		
i	(Name o	of Contact Person)	
	(Fi	rm/ Company)	
12864 BIS	CAYNE BLVD	(Address)	·
		(Address)	
MIAMI FL		tate and Zip Code)	<u></u>
For further information co	oncerning this matter,	please call:	
GREGORY CAMPBEL (Name of Con		at (561) 771-1180 (Area Code & Daytime T	
•		nade payable to the Florida Depa	rtment of State:
	43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpo P.O. Box 6327 Tallahassee, FL 33	rations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	cle .

Articles of Amendment to Articles of Incorporation of



of	111/2: 314
KIDZ WORLD FOUNDATION (Name of Corporation as currently filed with	
N080000113	321
(Document Number of Corporat	
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts
a. If amending name, enter the new name of the corporation	<u>n:</u>
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	
3. Enter new principal office address, if applicable:	640 NE 149 STREET
Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI FL 33161
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	640 NE 149 STREET
	MIAMI FL 33161
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: GREGORY	CAMPBELL
New Registered Office Address: (Flor	STREET ida street address)
MIAMI	, Florida 33161 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am position.	Agent: familiar with and accept the obligations of the
Signature of New	Registered Agent, if changing

Page 1 of 3

· 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) Title Name 1 Address **Type of Action** Р MIKEL MITTAL 12864 BISCAYNE BLVD ■ □ Add SUITE 370 Remove MIAMI FL 33181 GREGORY CAMPBELL CEO MAIMI FL 33161 Remove □ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 1-10-09		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
There are no members or adopted by the board of dis	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Dated <u>01/1</u>	0/2009	
Signature		
	the chairman or vice chairman of the board, president or other officer-if directors	
	e not been selected, by an incorporator - if in the hands of a receiver, trustee, o	
oth	GREGORY CAMPBELL (Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
	CEO	
	(Title of person signing)	

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