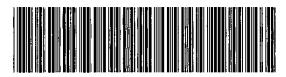
N09000003285

| (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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| • | | | | |

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
109 AUG 20 PH 1: 52

Ant Amend May 8/21/09

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: One World No | w Inter | nation | al Inc. | |
|--------------------------|---|-------------|------------------------------|--|---|
| DOCUMENT NUM | BER: NO9000003285 | | | | <u> </u> |
| The enclosed Articles | of Amendment and fee are sub | bmitted for | r filing. | | |
| Please return all corre | spondence concerning this mat | ter to the | following | g: | |
| *********** | | is Cochr | | | |
| | (Name of | Contact F | Person) | | |
| - | (Firm | n/ Compar | ıy) | | |
| | | Tamiami | Trail | | |
| | (, | Address) | | | |
| | | Port, FL 3 | | ** · · · · · · · · · · · · · · · · · · | |
| | (City) Su | | (Code) | | |
| | E-mail address: (to be use | d for futu | re annua | report notifi | cation) |
| For further information | n concerning this matter, pleas | e call: | | | |
| Chris Cochran | | at (| 941 |) 237-70 | 98 |
| (Name | of Contact Person) | | (Area | Code & Dayt | 98 ime Telephone Number) |
| Enclosed is a check for | or the following amount made p | payable to | the Flori | da Departme | nt of State: |
| □\$35 Filing Fee | ☑ \$43.75 Filing Fee & Certificate of Status | Certif | fied Copy itional co | | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amen Divisi P.O. I | ng Address dment Section on of Corporations Box 6327 lassee, FL 32314 | | Ameno Division Clifton | Address dment Section on of Corporat n Building | ions |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

One World Now International Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

NO900003285

| | Articles of Amendment | |
|--|---|--|
| • | to | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ |
| A | rticles of Incorporation | ALCON A |
| | of | 09 1949 |
| One World | Now International Inc. | The Strong |
| (Name of Corporation as c | urrently filed with the Florida Dept. of S | tate) |
| N | O9000003285 | tate) Alicania Siciliania Al |
| (Document) | Number of Corporation (if known) | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
| Pursuant to the provisions of section 617.10 he following amendment(s) to its Articles of | | Profit Corporation adopts |
| A. If amending name, enter the new nam | e of the corporation: | |
| The new name must be distinguishable an abbreviation "Corp." or "Inc." "Compan" 3. Enter new principal office address, if | y" or "Co." may not be used in the name. applicable: | ecorporated" or the |
| Principal office address <u>MUST BE A STR</u> | REET ADDRESS) | |
| | | |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF | | |
| | | |
| | | |
| D. If amending the registered agent and/new registered agent and/or the new remarks agent and/or the new registered Agent: | | nter the name of the |
| New Registered Office Address: | (Florida street address) | <u></u> |
| | | , Florida |
| | (City) | (Zip Code) |
| ew Registered Agent's Signature, if cha hereby accept the appointment as registe osition. | nging Registered Agent: ered agent. I am familiar with and acc | ept the obligations of the |
| | Signature of New Registered Agent, if co | hanging |

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) Address Title Name **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove _ 🗆 Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Article VIII Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations

Code, or corresponding section of any future federal tax code.

Article VIIII Upon 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 future federal tax code, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the court of common pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purpose.

that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue

| The date of each amendment(s) adoption: August 14, 2009 | | | | | |
|---|--|--|--|--|--|
| Effective date <u>if applicable</u> : | (date of adoption is required) August 14, 2009 | | | | |
| | (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 radopted by the board of dir | members entitled to vote on the amendment(s). The amendment(s) was/were rectors. | | | | |
| Signature(By | the chairman of 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, or er court appointed fiduciary by that fiduciary) | | | | |
| | Christopher Cochran (Typed or printed name of person signing) | | | | |
| | CEO/Director (Title of person signing) | | | | |
| | (Title of beison signing) | | | | |