

Florida Department of State Division of Corporations

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RAOIII. 124958

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850)224-1640

Encyle the email address for this business entity to be used for future of the control one email address please.

**Encyle of the control of the contr

COR AMND/RESTATE/CORRECT OR O/D RESIGN KARATE WITHOUT BORDERS INC.

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Corporate Filing Menu

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To: FL Dept of State Subject-RA0111.124958 From: Kim Weidenbach

Thursday, May 13, 2010 4:49 PM Page: 2 of 5

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5/12/2010 4:30:06 PM PAGE

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May 12, 2010

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FLORIDA DEPARTMENT OF STATE

Division of Corporations

10162 N.W. 50 STREET SUNRISE, FL 33351

SUBJECT: KARATE WITHOUT BORDERS INC.

REF: N10000000417

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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Darlene Connell Regulatory Specialist II FAX Aud. #: H10000114777 Letter Number: 810A00012047

P.O BOX 6327 - Tallahassee, Florida 32314

H10000114777 3



Articles of Amendment to Articles of Incorporation of

	t Borders Inc.	
(Name of Corporation as currently	fled with the Florida Dept.	of State)
N10000	000417	
, (Document Number of	of Corporation (if known)	 -
Persuant to the provisions of section 617.1006, Floridate following amendment(s) to its Articles of Incorporate	da Statutes, this <i>Florida Not I</i> pration:	For Profit Corporation adop
A. Hamending name, enter the new name of the	corporation:	
<u> </u>	NIV	
The new name must be distinguishable and contain abbreviation "Corp." or "Inc." <u>"Company" or "Co</u>	n the word "corporation" or "may not be used in the nar	"incorporated" or the
B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET AD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<i>0</i> x0	/n
D. <u>If amending the registered agent and/or registance</u> new registered agent and/or the new registered	ered office address in Fiorid I office address:	enter the rance of the
Name of New Registered Agent:	~/A	.
New Registered Office Address:	(Florida street address)	
	(City)	, Floride
		(21 <u>0</u> C-002)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ages		accept the obligations र्ज क
position.		H10000114777 3

Signature of New Registered Agent, if changing

H100001147773

,	ng the Officers send or Director and title, seems, and mistress of	each Officer und/or Director being add	led:
	kitarai skesa ij reassary		
<u>Title</u>	Name	Address	Type of Action
	,	·····	🗖 Add
			C Remove
	۸/ به		
	•		Remove
			
			Remove
			
	nding or adding additional Arti additional sheets, if necessary).		
Said org	anization is organized exclu	sively for charitable, educational,	and scientific
purpose	s, the making of distribution	s to organizations that qualify as e	xempt organizations
under se	ection 501(c) (3) of the Inten	nal Revenue Code, or correspond	ing section of any
future fe	deral tax code.		
Upon dis	ssolution of the organization	, assets shall be distributed for on	e or more exempt
purpose	s within the meaning of sect	ion 501 (c) (3) of the internal Rev	ense Code, or
	onding section of any future	federal tax code, or shall be ਯੰਤਹਾਵੀ	cased to the federal
correspo		vernment for a numble numbee. A	ma puede monato eléti
	ient, or to a state or local go	verticient, for a public perpusa. A	A SAME SESSED AND
governn		n Pleas of the county in which the	3 (. 3 7)
governn	d of by the Court of Common		principal office of the
governm dispose organiza	d of by the Court of Common ation is then located, exclusi	Pleas of the county in which the	principal diffice of the organization or

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The date of each americans mighe	5- 11-10-	
Effective date Waze was de	(dess of adaption is required)	-
	the more than 90 days after amendment file date)	_
Adspines of Assendment(s)	(CHECK ONE)	
ि प्रोट स्टब्स्योक्साई(s) was/were ad बच्च च्यान sufficient for approval	opted by the members and the number of votes cast for the amendmen	ા(ક)
There are no members or members adapted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/we	re
Dated 5 - 11	1-10	
Signature	3	
(By the c	chairman or vine chairman of the board, president or other officer-if di been selected, by an incorporator, if in the hands of a receiver, tru art appointed fiduciary by that faturing?	irectors istee, o
	CHAIRMAN BUTVale	
	(Typed or printed name of person signing).	
	CHAIRMAN	
	(Title of person significant)	

Page 3 of 3