

| (Re | equestor's Name) | |
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| (Ac | ldress) | |
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| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | ısiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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03/29/10--01608--024 **52.50

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: WYUN WOOD Program, I | 1 Youth Enrich | ment Optimist |
|--|--|--|
| DOCUMENT NUMBER: NIODODOO | <u> </u> | · · · · · · · · · · · · · · · · · · · |
| The enclosed Articles of Amendment and fee are submitted | ted for filing. | . 14 . |
| Please return all correspondence concerning this matter to | o'the failowing: | |
| Sabrina Jacker (Name of Cor | ntact Person) | |
| HynnWood Youth E Frogram, Inc. (Firm/Co | nrichment Option | nist |
| 1970 N.W. 47 th - | Terrace ress) | |
| Miami, Florida (City/ State and | 33142 nd Zip Code) | · |
| E-mail address: (to be used for | VOLOO, COM refuture annual report notification | n) |
| For further information concerning this matter, please cal | ll: | |
| Sabrina Jackson (Name of Contact Person) | at (<u>86</u>) <u>539 - C</u> (Area Code & Daytime 1 | 1201 Telephone Number) |
| Enclosed is a check for the following amount made payal | ble to the Florida Department of | State: |
| Certificate of Status | | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

| WynWood Youth Enrich | ment Optimist Program, Inc. |
|--|--|
| N 1000000086 (Document Number of Corpo | |
| Pursuant to the provisions of section 617.1006, Florida Statuth the following amendment(s) to its Articles of Incorporation: | • |
| A. If amending name, enter the new name of the corporal way of the corporal the new name of the corporal the new name must be distinguishable and contain the weather the new name must be distinguishable and contain the weather the new name of the corporal than the new name of | nt Optimist Fragram Inc. |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | FILED FILED 10 MAR 29 PM W: 31 SECRETARY OF STATE FALLAHASSEE, FLORI |
| D. If amending the registered agent and/or registered off new registered agent and/or the new registered office: | |
| Nume of New Registered Agent: | |
| New Registered Office Address: (FI | lorida street address) |
| | (City), Florida(Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I a position. | Agent: m familiar with and accept the obligation: f the |
| Signature of No | ew 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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--|---------------------------------------|----------------|
| CEO | Sabrina Jackson | 1970 N.W. 47 Terr: Miami, FL 33142 | ☐ Add |
| SEC | Octavia Smith | 1876 N.W. 55 Terr Miami, FL 33142 | ☐ Add |
| P | John Harris | 270 N.W. 120 451. Miami, FL 33168 | ☐ Add Remove |
| | g or adding additional Articles, enter clitional sheets, if necessary). (Be specific | | |
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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)

Type of Action e□ Add Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

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)

| <u>Title</u> | Name | Address | Type of Action |
|--------------|---|-------------------------------------|----------------|
| VP_ | Bodney Buffer | 16/2 N.W.5/ Ten Miomi, FL. 33/42 | Add Remove |
| TRE | Kevin Ross | 4010 N.W. 15th C. Miami, FL. 331 | Add Remove |
| SEC | Karen Holmes | 2887 N.W. 204 Miamy FL 330 | Add Remove |
| | ling or adding additional Articles, ente Iditional sheets, if necessary). (Be spec | | |
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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)

| <u>Title</u> | Name | Address | Type of Action |
|--------------|---|--|---|
| TRU | Kenneth Bruce | 3370 N.W.17Au HOF#1009 Miami, FL 33142 | Add Remove |
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| | | · · · · · · · · · · · · · · · · · · · | ☐ Add☐ Remove |
| | ing or adding additional Articles, enter ditional sheets, if necessary). (Be speci | | |
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| The date of each amendment(s) adoption: March 23, 2010 |
|---|
| Effective date if applicable: March 24,2010 |
| (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) |
| 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 March 24, 2010. |
| Signature Lam C. Butt |
| (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, o other court appointed fiduciary by that fiduciary) |
| Larry Covey BuH5 (Typed or printed name of person signing) |
| CEO (Title of person signing) |