N11000005088

(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: Dy Hy carry N-21-12

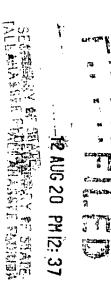




500236773425

06/27/12--01015--002 **35.00

My



AUG 2 1 2012 T. ROBERTS



June 28, 2012

ALEXA GROOMS PORTRAITS OF OUR WORLD 605 CRANE PRAIRE WAY OSPREY, FL 34229

SUBJECT: PORTRAITS OF OUR WORLD, INC.

Ref. Number: N11000005088

We have received your document for PORTRAITS OF OUR WORLD, 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Tina Roberts
Regulatory Specialist II

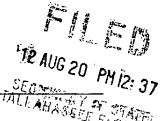
Letter Number: 712A00017674

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: POTTRAITS OFOUT WOTICING.
DOCUMENT NUMBER: N1100005088
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Portraits of Dur World Inc. (Firm/Company)
605 Crane prairie way (Address)
OSPYCULEU 34220 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
A 1-ex CL C3 r 00 r S at (941) 400 - 2670 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address Amendment Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314 Division of Corporations Clifton Building Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



POřtraits of c	nu r 1~(1)	cicl Inc	SEAM	PH iz
(Name of Corporation as currently	filed with the Flor	ida Dept. of State)	MILEARS	
# 1100000CE	~@G		and the second s	5.3
N 11000005	Number of Corporat	ion (if known)		
rsuant to the provisions of section 617.10 endment(s) to its Articles of Incorporation		, this <i>Florida Not For I</i>	<i>Profit Corporation</i> adopts the	he follo
If amending name, enter the new nam	e of the corporatio	<u>n:</u>		
NIA				The
me must be distinguishable and contain to company" or "Co." may not be used in the		on" or "incorporated"	or the abbreviation "Corp.	" or "I
Enter new principal office address, if	applicable:	NVA		
incipal office address <u>MUST BE A ST</u> E				
	•			_
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ble: SEICE ROY)	~\/A		
(Matting datess MAT BE AT 031 01	TICL BOX	19/7		
If amending the registered agent and/ new registered agent and/or the new !			nter the name of the	
new registered agent and/or the new i	registereu office ac	uress:		
Name of New Registered Agent:	N/A			
-	(Florida street address)		
w Registered Office Address:				
_			, Florida	
•	(City)		(Zip Code)	
Desistant Amentle Signature if the	naina Dagistarad	Locant.		
w Registered Agent's Signature, if cha ereby accept the appointment as register	ed agent. I am fan	iliar with and accept th	e obligations of the position	n.
and a supplemental supplem	g	,	~ · · ·	
	411	1.4		
Signo	ature of New Registe	ered Agent, if changing		

Page 1 of 4

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: X Change	<u>PT</u>	<u>John D</u>	<u>loe</u>	
<u>X</u> Remove	<u>V</u>	Mike J	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change Add Remove	-\$ \$\)	¥	cariton arooms	DSPICHIFL 34329
2) Change Add Remove		_		
3) Change Add Remove		<u>-</u>		
4) Change Add Remove		_		
5) Change Add Remove		_		
6) Change Add Remove		_		

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
41/~	
·	
	•

The date of each amendment(s) adoption: 7/15/17			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes east for the amendment(s)		
There are no members or memb adopted by the board of directo	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.		
Dated 7/15/1	.2.		
Signature <u>A</u>	ra A Georg		
have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or		
other court a	appointed fiduciary by that fiduciary)		
AITXO	R. Grooms		
	(Typed or printed name of person signing)		
	indent Iniversity		
1-100	(Title of person signing)		