

N14000010500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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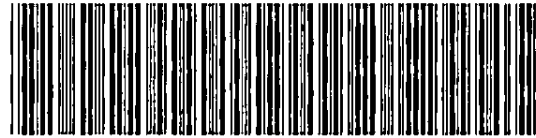
(Business Entity Name)

(Document Number)

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DEC 7 2020

John T. Stemberger
Attorney & Counselor at Law

Maria Camacho
Paralegal

LAW OFFICES OF
JOHN STEMBERGER

A Professional Association
4853 SOUTH ORANGE AVENUE
ORLANDO, FLORIDA 32806

TELEPHONE: 407-251-1957
FACSIMILE: 407-251-0023

Civil Trial Practice
Personal Injury & Wrongful Death
Commercial Litigation
Business Law

November 30, 2020

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


RE: Let the Whole World Know, Inc.
Document No.: N14000010500

TO WHOM IT MAY CONCERN:

Enclosed are the original signed Articles of Amendment to amend the Articles of Incorporation of Let the Whole World Know, Inc. Additionally, enclosed is a check made payable to the Florida Department of State in the amount of \$35.00 to cover the filing fee.

Thank you for processing.

Sincerely,


John T. Stemberger

JTS:mc

Encls.: Articles of Amendment
Check #011413

CELEBRATING OUR



COVER LETTER

TO: Amendment Section
Division of Corporations

LET THE WHOLE WORLD KNOW, INC.

NAME OF CORPORATION: _____

N14000010500

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria Camacho, Paralegal

(Name of Contact Person)

LAW OFFICES OF JOHN STEMBERGER, P.A.

(Firm/ Company)

4853 South Orange Avenue, Suite C

(Address)

Orlando, FL 32806

(City/ State and Zip Code)

paralegal@orlandolawyer.tv

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Camacho

407

251-1957

ai

(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

☐ \$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 Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

LET THE WHOLE WORLD KNOW, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N14000010500

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation: N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable: N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable: N/A

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>VP</u>	<u>BROWN, CRISTAL S</u>	<u>226 E VANDERBILT STREET</u> <u>ORLANDO, FL 32804</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>S</u>	<u>BROWN ROBLES, ADDISON Q</u>	<u>803 E. CHURCH STREET</u> <u>ORLANDO FL 32801</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>MCGUFFIN, PATRICK J</u>	<u>289 LAKE DOE BLVD.</u> <u>APOPKA, FL 32703</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ST</u>	<u>FUSCO, DOMENIC</u>	<u>1317 SOUTH PARK AVENUE</u> <u>SANFORD, FL 32771</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

F. If amending or adding additional Articles, enter change(s) here: N/A

(attach additional sheets, if necessary). (Be specific)

☐ 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 19 NOV 2020 AD

Signature William D. Cain
(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, or other court appointed fiduciary by that fiduciary)

William D. Cain

(Typed or printed name of person signing)

President

(Title of person signing)