

NH0000 10928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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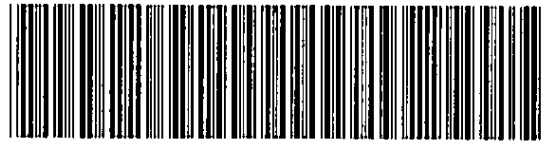
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
NORTH DAKOTA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 JUL 15

SECRET
TALL

July 15, 2021

LINDSAY CASTILLO
10100 W SAMPLE RD 3RD FLOOR
CORAL SPRINGS, FL 33065 US

SUBJECT: NORTH CENTRAL CARIBBEAN CULTURE CARNIVAL
ASSOCIATION, INC.
Ref. Number: N14000010928

We have received your document for NORTH CENTRAL CARIBBEAN CULTURE CARNIVAL ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

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.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 321A00016328

2021 JUL 30
COPY
TALL

Articles of Amendment
to
Articles of Incorporation
of

NORTH CENTRAL CARIBBEAN CULTURE CARNIVAL ASSOCIATION

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

N14000010928

(Document Number of Corporation (if known))

FILED
2021 JUL 30 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

TRAFFIK & SEX Corporation

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:

(Principal office address **MUST BE A STREET ADDRESS**)

10100 W Sample Road 3rd floor

Coral Springs, Florida 33065

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

10100 W Sample Road 3rd Floor

Coral Springs, Florida 33065

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:

Legalinc Corporate Service Inc

~~7021 University Blvd~~

5237 Summerlin Commons Blvd

(Florida street address)

New Registered Office Address:

~~Winter Park~~ Fort Myers

(City)

Florida

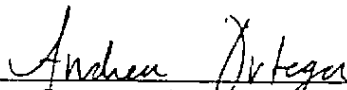
~~32792~~ 33907

(Zip Code)

Suite 400

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 checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" 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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CEOD</u>	<u>Lindsay Castillo</u>	<u>10100 W Sample Road 3rd fl</u> <u>Coral Springs, FL 33065</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>COOD</u>	<u>Json Crown</u>	<u>10100 W Sample Road 3rd fl</u> <u>Coral Springs, FL 33065</u>
<input checked="" type="checkbox"/> Remove 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Eliezer Cenatuas</u>	<u></u> <u></u> <u></u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Jennifer Figura</u>	<u>10100 W Sample Rd 3rd floor</u> <u>Coral Springs, FL 33065</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

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

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

Name change from North Central Caribbean Culture Carnival Association Inc to Traffik and Sex Corpora

Lined area for text entry.

The date of each amendment(s) adoption: May 29th, 2021, if other than the date this document was signed.

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ 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 5/29/2021

Signature _____

(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)

Lindsay Castillo

(Typed or printed name of person signing)

Director/CEO

(Title of person signing)