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COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: International Business Innovation Association
DOCUMENT NUMBER: N 1500007 887
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Danalyn Patty Stephens (Name of Contact Person)
International Business Innovation Association (Firm/Company)
3361 Rouse Rd. Suite 200
Orlando FL 32817 (City/State and Zip Code)
PStephens @ In bia. Or 9 E-mail address: (to be used for luture panual report notification)
For further information concerning this matter, piease call:
Danalyn Path Stephens at 407 - 965 - 5653 (Name of Contact Person) (Area Code) (Daysime 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) \$\int \frac{1}{2} \
Mailing Address Street Address Amendment Section

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Artirles of Incorporation of

International Business	Innovation Association
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
N150000078	· 87
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the cornors	tion:
NA	The new
name must be distinguishable and contain the word "corpon "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."
R. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered offi	
new registered agent and/or the new registered office	ADDITESS:
Name of New Registered Agent: 17	
New Registered Office Address:	(Flutida street address)
NA	
	(City) (Zip Code)
New Registered Agent's Signature, if chapging Registered hereby accept the appointment as registered agent. I am fa	
NA	Ignature of New Registered Agent, if changing
Ĭ	ng

Page 1 of 4

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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)

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 us John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add		Dec Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	PCE0	Kirstie Chadwick	3361 Rouse Rd Suite 200 Orlando FL 32817
2) Change Add Remove	DCEO	charles Ross	3361 Rouse Rd Suite 200 Orlando FC 32817
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			
Kenjove		.	

anach additional sheets, if necessary).	(Be specific)
VA	
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date this document was signed.	190n;	If other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not liment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes east for the amendment(s)	
There are no members or members adopted by the hoard of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 9 19	1118	
Signature Janua	Loughtin	
havehot been so	or vice chairman of the board, president or other officer-if directors elected, by an incorporator — if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	-
Jami	ie Cougnlin	
	(Typed or printed name of person signing)	
Chai	iv_	
	(Title of person signing)	