

N1600000 7803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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C. CARROTHERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2016

ROSELAURE WILSON
3387 CHARMONT DR
JACKSONVILLE, FL 32277

SUBJECT: PLATEFORME KORE LAVI CORPORATION
Ref. Number: N16000007803

We have received your document for PLATEFORME KORE LAVI CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A SIGNATURE IS REQUIRED ON PAGE 4 OF 4

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.

Cathy A Carrothers
Regulatory Specialist

Letter Number: 516A00021853

LETTER OF ACKNOWLEDGEMENT

From: Roselaure Wilson, President

To: Florida Department of State

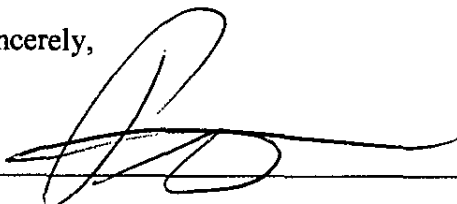
Re: Amendment to N16000007803

Plateforme Kore Lavi

Date: Wednesday, September 21, 2016

The purpose of this correspondence is to acknowledge and request a name change of the organization from Plateforme Kore Lavi, Corp to Jacksonville Woman Outreach, Corp upon receipt of this correspondence. Should you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be 'Roselaure Wilson', written over a horizontal line.

Roselaure Wilson, President

(904) 302-2006 or rosewilsom@gmail.com

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Plateforme Kore Lavi

DOCUMENT NUMBER: N16000007803

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

Please return all correspondence concerning this matter to the following:

Roselaure Wilson

Name of Contact Person

Firm/ Company

3387 Charmont Dr,

Address

Jacksonville, FL 32277

City/ State and Zip Code

rosewilson@gmail.com

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

For further information concerning this matter, please call:

Roselaure Wilson at (904) 302-2006
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:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Plateforme Kore Lavi

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

N16000007803

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

Jacksonville Woman Outreach, Corp

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

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

3387 Charmont Dr,

Jacksonville, FL 32257

C. Enter new mailing address, if applicable:

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

3387 Charmont Dr,

Jacksonville, FL 32257

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

Roselaure Wilson

3387 Charmont Dr,

(Florida street address)

New Registered Office Address:

Jacksonville

(City)

Florida 32277

(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:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>VP</u>	<u>COLLOT, EVENS</u>	<u>8 BOX TURTLE LANE</u>
<u> </u> Add			<u>SICKLERVILLE, NJ 08081</u>
<u> </u> Remove			
2) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
3) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
4) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
5) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
6) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			

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

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

Organization's name is being changed.

[illegible]

H. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

09/22/2016

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

09/22/2016

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____

Signature _____

(By a director, president or other officer — if directors or officers have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Roselaure Wilson

(Typed or printed name of person signing)

President (P)

(Title of person signing)