## N33763

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: World Gok	Foundrich Inc
DOCUMENT NUMBER:	33763
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the fi	ollowing:
Stacic W	CSVC
world GOIF Four	n/ Company)
On world Solf	
	FC 33093
diane. Letsundo	e amusi report notification)
For further information concerning this matter, please call:	
State Wagner (Name of Contact Person)	at (COU) QUC, U355 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to t	he Florida Department of State:
	ed Copy Certificate of Status ional copy is Certified Copy
Mailing Address Amendment Section	Street Address Amendment Section

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 Articles of Incorporation

All	of	5	
1 12	11 Call.	and Land	~ CC:
(Name of Corporation as cu	rently filed with the Flo	rida Dent. of State)	++1C
(	V133.J(V3	)	
(Downment S	umber of Corporation (it	knowni	
	•		
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	or Profit Corporution adopts	s the following
A. If amending name, enter the new name of the corpo	oration:		
			The new
name must be distinguishable and contain the word "corp" Company" or "Co." may not be used in the name.	oration" or "incorporate	ed" or the abbreviation "Cor	p." or "Inc."
B. Enter new principal office address, if applicable:		_	<del></del>
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u> )		
	<del></del>		<i>ω</i> ≥
	<del></del>		<del>- 3</del>
C. Enter new mailing address, if applicable:		ָרָ רַרָ	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			
		<u></u>	f) reat
			7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7
D. If amending the registered agent and/or registered	office address in Florida	- anter the name of the	FIG. 9
new registered agent and/or the new registered offi		t, enter the name of the	ro, <b>G</b>
Name of New Registered Agent:			
New Registered Office Address;	(1	Florida street address)	
Men registered office radaress.			
	(City)	, Florida (Zip Code	
	(Cnj)	(z.ip Coac	,
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I ar		u the obligations of the necit	·
r nervoy accept the appointment as registered agent. Tar	п затишт мин ана ассер	a ine onaganons of the posti	1771,
<del></del>	Signature of New Regi.	stered Agent, if changing	

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NA

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 X Remove X Add	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) K Change Add Remove	5, 3VP	Diane M. Telswor	SI Dugustine Fe 32092
2) Change			
Add			
Remove			
3 ) Change			
Add			-
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

E. If amending or adding additional Articular (attach additional sheets, if necessary).	(Be specific)
······································	

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The date of each amendment(s) adoption: 1 19 date this document was signed.	_, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
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.	
Dated5/31/19,	
(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)	_
(Typed or printed name of person signing)	
Secretary Seniar Vice Preside  (Title of person signing)	,VC