P0200063500

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3/11/15

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: World Peti	roleum Corp				
DOCUMENT NUMBER: P0200006350					
The enclosed Articles of Amendment and fee are s					
Please return all correspondence concerning this m	atter to the following:				
Michael B. Mane	es				
	Name of Contact Person	1			
World Petroleum		•			
	Firm/ Company				
3701 SW 47th A	ve Suite 101				
	Address				
Davie FL 33314					
	City/ State and Zip Code				
michael@manesleg	al.com				
	used for future annual report	notification)			
For further information concerning this matter, please call:					
Michael B. Manes <u>at (954</u>) 523-1844					
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 Fec & 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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301			

Articles of Amendment ίo Articles of Incorporation of

FILED 2015 HAR 10 PM 4: 30

World	Petro	leum	Corp
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(Name of Corporation as currently filed with the Florida Dept. of State)

P02000063500



1 020000000			7 ' ` '	
(Document Number of	Corporation (if kno	wn)	<u></u>	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	a Statutes, this <i>Flore</i>	ida Profit Corporation ad	opts the following	amendment(
A. If amending name, enter the new name of the co	orporation:			
			1	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	," "Inc," or "Co".	A professional corpora	rated" or the abb	reviation
3. Enter new principal office address, if applicable	e:			
Principal office address <u>MUST BE A STREET ADL</u>				
	_	·		
•				
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>			
	,			
D. If amending the registered agent and/or registe.	rad office address i	n Florida anter the nam	e of the	
new registered agent and/or the new registered		n Piorida, enter the nam	e or the	
	<u>.</u>			
Name of New Registered Agent				
	(Florida street a	ddress)		
New Registered Office Address:		, Florida_		
New Acquisieren Office Anniess.	(City)		(Zip Code)	
	, ,,,			
New Registered Agent's Signature, if changing Reg	gistered Agent:			
hereby accept the appointment as registered agent.		and accept the obligations	of the position.	
Cinnatana AM	lew Registered Agen	t if changing		
oignature oj N	EN REGISTETER AREIT	i, ij onanging		

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: XChange	<u>PT</u>	John Doc	
X Remove	<u>v</u> .	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	Angela Miranda	3701 SW 47th Ave Ste 101
Add			Davie FL 33314
Remove			
2) Change			
Add			**************************************
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	~	water water and the same and th	
Add			
Remove		•	
6) Change			
Add			
Remove			

amending or adding additional ttach <i>additional sheets, if necessa</i>	rry). (Be specific)		
		Walled should be a committee of the comm	
Calabara			
		_	
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##	· · · · · · · · · · · · · · · · · · ·	 	
77.1			
			1200
f an amendment provides for an	exchange, reclassification, o	r cancellation of issued	shares,
provisions for implementing the (if not applicable, indicate N/2	amendment if not contained	In the amendment itse	if:
(i) not applicable, matche ivi	a)		
,		·	

The date of each amendment date this document was signed		, if other than the
,	March 5 2015	
Effective date if applicable:	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	•
Dated	3/5/2015	
Signature		
(I s	By-a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	_
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	