P0700020/8/

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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HAY 13 PH 1: 28

C. LEWIS

MAY 23 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

	NAME OF CORPO	RATION: World Fran	ning Design, Inc					
	DOCUMENT NUM	IBER: P0700002018	1					
	The enclosed Articles of Amendment and fee are submitted for filing.							
	Please return all corr	espondence concerning this ma	tter to the following:					
		Giovanny A NIno						
		Name of Contact Person						
		WFD						
			Firm/ Company					
		PO BOX 721260	• •					
61))							
ייס.	Orlando	− Orlabdi , FL 3287	2					
	01101100	City/ State and Zip Code						
			City/ State and Zip Cod					
		E-mail address: (to be us	sed for future annual report	notification)				
	For further informati	or further information concerning this matter, please call:						
	Veibeire Divere		407	467 116E				
	Yajhaira Riv		at (<u>407</u>	_ _. 467-1165				
	Name	Name of Contact Person		de & 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 Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailir		ailing Address	Street Address					
	- •••	nendment Section	Amendment Section					
		vision of Corporations D. Box 6327		on of Corporations Building				
	= ::	llahassee, FL 32314		Executive Center Circle				
				assee, FL 32301				

APPMUYES AND FILED

Articles of Amendment Articles of Incorporation of

14 MAY 13 PH 1: 28 SECRETARY OF STATE TALLAHASSET FLORIDA

P07000020181	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
N/A	The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2213 S Conway RD. #1301
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Orlando, FL 32812
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 721260
(MANUAL SIGNAL S	Orlando, FL 32872
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent N/A	
N/A	
(Flor	ida street address)
New Registered Office Address: N/A	. Florida
	(City) (Zip Code)
New Registered Office Address: N/A New Registered Agent's Signature, if changing Registered A	(City) (Zip Code)
I hereby accept the appointment as registered agent. I am fam	ulliar with and accept the obligations of the position.

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	<u>PT</u>	John Doe	
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	Р	Yajhaira Rivera	PO BOX 721260
Add			Orlando, FL 32872
Remove			
2) Change	Р	Giovanny A Nino	PO BOX 721260
Add			Orlando, FL 32872
Remove			
3) Change	N/A	<u>N/A</u>	<u>N/A</u>
Add			
Remove			*****
4) Change	N/A	N/A	N/A
Add			
Remove			
5) Change	N/A	N/A	N/A
Add			
Remove			
6) Change	N/A	N/A	N/A
Add			
Remove			

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If an amendme	t provides for an exchan	ge, reclassificat	on, or cancellatio	n of issued shares,	
(if not app	implementing the amend icable, indicate N/A)	ment if not cont	ained in the amen	dment itselt:	
., .,	,				
ιΛναηην Δ Νι	no - P - entiled of 10	00% of Share	es 		
——————————————————————————————————————					
<u>— — — — — — — — — — — — — — — — — — — </u>				/	
					/
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				_/	
- Individually A 14					



The date of each amendment	t(s) adoption: N/A	14 MAY 13 PM 1:28	, if other than the
date this document was signed		SECRETAPY_ST_\$144.	
Effective date if applicable:	N/A	TALLAHASSELETERANA	
	(no more the	an 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. ere sufficient for approval.	The number of votes cast for the amendment(s)	
		through voting groups. The following statement to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was	were sufficient for approval	
by	(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of direc	tors 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			
Dated Signature _		Thime	
· (I		officer - if directors or officers have not been	
	elected, by an incorporator — Ki ppointed fiduciary by that fiduci	n the hands of a receiver, trustee, or other court	
a _i	ppointed riddenary by that fidden	my \ \ \	
	Yajhaira Rivera	V	
	(Typed	or printed name of person signing)	
	Р		
		(Title of person signing)	