

# Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AMBAR DIAZ, P.A.
Account Number : 120110000016
Phone : (305)476-8100
Fax Number : (305)476-8788

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# COR AMND/RESTATE/CORRECT OR O/D RESIGN CARIBBEAN WORLDWIDE INTERNATIONAL CORP

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ATTARASSEE, FLORIDA

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5/16/2015

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### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: CARIBBEA	AN WORLDWIDE INTERNATIONAL CORP.
DOCUMENT NU	MBER:	P08000084810
The enclosed Artic	les of Amendment and fee a	re submitted for filing.
Please return all co	rrespondence concerning thi	is matter to the following:
_	AM	MBAR DIAZ, ESQ.
	N	lame of Contact Person
_	Al	MBAR DIAZ, P.A.
		Firm/ Company
_	782 N	IW 42 AVENUE # 434
		Address
_		MIAMI, FL 33126
	Ci	ity/ State and Zip Code
<u></u>	E-mail address: (to be used	d for future annual report notification)
For further informa	tion concerning this matter,	please call:
	BAR DIAZ, ESQ.	at ( 305 ) 476-8100  Area Code & Daytime Telephone Number
		nade payable to the Florida Department of State:
	_	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Ad		Street Address Amendment Section
Division of	Corporations	Division of Corporations
P.O. Box 63 Tallahassee,		Clifton Building 2661 Executive Center Circle Tollahassas FL 22201
		Tallahassee, FL 32301 (((H11000132989 3)))

3054768788

TO:18506176380

(((H11000132989 3)))

#### Articles of Amendment to Articles of Incorporation of

# CARIBBEAN WORLDWIDE INTERNATIONAL CORP.

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

	8000084810			
(Document Nu	imber of Corporat	tion (if known)		
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		tes, this <i>Florida</i>	Profit Corporation a	dopts the following
A. If amending name, enter the new name	of the corporation	on:		
	N/A			The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	e designation "C	Corp," "Inc," or	"Co". A professiona	
B. <u>Enter new principal office address, if ap</u> (Principal office address <u>MUST BE A STRE</u>		N/A		<del></del>
				in the second
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		N/A		
				<u>-</u> 일본 :
D. If amending the registered agent and/or new registered agent and/or the new reg			ida, enter the name o	f the
		41 6331		
Name of New Registered Agent:	<u>N/A</u>			14c
New Registered Office Address:	(Flor	ida street address	<del>)</del>	
	(			
	(City)		, Florida (Zip Code)	
New Registered Agent's Signature, if chang	ing Registered A	Agent:		•
hereby accept the appointment as registered	agent. I am fam	iliar with and acc	ept the obligations of	the position.
***************************************	G) 231	*		
	Signature of New	Registered Agen	t, if changing	
	<b>in.</b> .	44		
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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)

Title	<u>Name</u>	Address	Type of Action
<u>S/T</u> .	FRANK DUBROQ	13680.SW 51 ST MIRAMAR FL 33027	
<del></del>	<u> </u>		_
<del></del>			_
E. If amend (attach ad	ing or adding additional Articles, enter ditional sheets, if necessary). (Be speci	change(s) here: fic)	
N/A			
•			
			<del></del>
provisio	endment provides for an exchange, rec ns for implementing the amendment if	lassification, or cancellation of be not contained in the amendmen	ssued shares, t itself:
(If no	t applicable, indicate N/A)		
	<u>, , _                                 </u>		<del>,</del>
			***************************************
		Page 2 of 3	(((H11000132989 3)))
			(((1111000125007270)

MΑ	Y-18-2011 01:05P FROM:AMBA	AR DIAZ,P.A.	3054768788	TO: 18506176380	P.5
	The date of each amendment(s	a) adoption:	5/16/11	(((H110001329	989 3)))
	-		date of adoption is require	rd)	
	Effective date if applicable:	(no more than 00 de	Tys after amendment file d	(ata)	
	,	no more man 70 at	iys ujter umenumem jne a	with	
	Adoption of Amendment(s)	(CHEC	K ONE)		
	The amendment(s) was/were	adopted by the sha	reholders. The number of	votes cast for the amendment(s)	
	by the shareholders was/were	e sufficient for appr	ovai.		
	-	approved by the sh	areholders through voting	groups. The following statement ely on the amendment(s):	,
	The amendment(s) was/were must be separately provided	approved by the sh for each voting gro	areholders through voting	ely on the amendment(s):	
	The amendment(s) was/were must be separately provided "The number of votes ca	approved by the sh for each voting gro ast for the amendme	areholders through voting	ely on the amendment(s):	,
	The amendment(s) was/were must be separately provided "The number of votes ca	approved by the sh for each voting gro	areholders through voting	ely on the amendment(s):	,
	The amendment(s) was/were must be separately provided  "The number of votes ca	approved by the sh for each voting gro ast for the amendme voting group)	nareholders through voting oup entitled to vote separate ent(s) was/were sufficient	ely on the amendment(s):	,
	The amendment(s) was/were must be separately provided  "The number of votes ca  by	approved by the sh for each voting gro est for the amendme voting group) adopted by the boa	areholders through voting up entitled to vote separatent(s) was/were sufficient: ""  ard of directors without sha	rely on the amendment(s):  for approval  areholder action and shareholder	•

(By addrector, 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)

Maria T. Trevelow
(Typed or printed name of person signing)

tresident Owner

(Title of person signing)

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