

P09000010509

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 MAR 15 AM 11:10

FILED

*Amend + NYC*

TB

MAR 18 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** WORLD FULL OF FLOWERS CORP

**DOCUMENT NUMBER:** P09000010509

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

Please return all correspondence concerning this matter to the following:

DIANA JELEN

Name of Contact Person

JELEN ACCOUNTING SERVICES, INC.

Firm/ Company

8181 NW 36TH STREET SUITE 6-A

Address

DORAL, FL. 33166

City/ State and Zip Code

JELENACCOUNTINGSERVICES@GMAIL.COM

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

For further information concerning this matter, please call:

DIANA JELEN

Name of Contact Person

at ( 305 )

591-9180

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 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)

**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

WORLD FULL OF FLOWERS, CORP

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

P09000010509

(Document Number of Corporation (if known))

FILED  
2010 MAR 15 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

IRREVOCABLE PROSPERITY TRUST, 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**)*

12420 SW 94 LANE

MIAMI, FL. 33186

**C. Enter new mailing address, if applicable:**  
*(Mailing address **MAY BE A POST OFFICE BOX**)*

12420 SW 94 LANE

MIAMI, FL. 33186

**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:*

*New Registered Office Address:*

12420 SW 94 LANE

*(Florida street address)*

MIAMI

*(City)*

, Florida 33186

*(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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	VIVIANA DUARTE	9735 NW 52 ST, SUITE 107 DORAL, FL. 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	ALFREDO SANTAMARIA	12420 SW 94 LANE MIAMI, FL. 33186	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	LEONOR LINERO	12420 SW 94 LANE MIAMI, FL. 33186	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

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**F. 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)*

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**Title**                      **Name**                      **Address**                      **Type of Action**

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**P**                      **LEONOR LINERO**                      **9735 NW 52 STREET 107**                      **Remove**  
**Dora, Fl. 33178**

The date of each amendment(s) adoption: 03/12/2010

(date of adoption is required)

Effective date if applicable: 03/12/2010

(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 03/12/2010

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)

LEONOR LINERO

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)