P15000038655

(Requestor's Na	me)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity	Name)				
(Document Num	ber)				
Certified Copies Certific	cates of Status				
Special Instructions to Filing Officer:					

Office Use Only



400289176294

09/06/16--01003--018 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NEW WOY	ld Enterprises	: Service Corporatio		
DOCUMENT NUMB	er: <u> </u>	38655	·		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	condence concerning this mat	tter to the following:			
-	18	1s isabel			
		Name of Contact Person けなしてA×			
	1860 N	Firm/Company PINE ISLAND	Ra: ste 109		
•		Address			
•	ISISTAX @	City/ State and Zip Code	•		
·		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
1818 18 <u>0</u> Name o	DC \ f Contact Person	at (<u>954</u> Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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		Street Address			

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 Articles of Incorporation of

NEW World Enterzorz (Name of Corporation as currently f	ise Sorvice	CORPORDTION
(Name of Corporation as currently f	iled with the Florida Dept. of State)	
P150000386	55	
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	". A professional corporation name	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	
Name of New Registered Agent		
(Florida street	address)	
New Registered Office Address:	, Florida_	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the po	(Zin Code)
Signature of New Reg	sistered Agent, if changing	<u> </u>

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 D	<u>Ooe</u>	
X Remove	<u>v</u>	Mike J	lones	
_X Add	<u>sv</u>	Sally S	S <u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	<u>S</u>		Manuel Gianpience	Chimox
Add Remove			·	WESTON, FL 33327
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove		•		
6) Change		_		
Add				
Remove				

					•
_/<	011006	Secr	ofeny	Manul	GIANPIERRE CH
(-					
	1169	ALEX	ANDE	R BEND	
	WEST	DN FL	333	R BEND 27	
				<i>-</i> 1	
	<u> </u>				
	<u> </u>				
i an am	and mant musikless	Son on ovel-page	voologii (Gootio	m on concellation of	Second above
provisio	ons for implement	ing the amendmer	reclassificatio	on, or cancellation of ined in the amendme	issued shares, nt itself:
provisio	endment provides ons for implement not applicable, indi	ing the amendmer	reclassification	on, or cancellation of ined in the amendme	issued shares, nt itself:
<u> rovisio</u>	ons for implement	ing the amendmer	reclassificatio	on, or cancellation of ined in the amendme	issued shares, nt itself:
<u>provisio</u>	ons for implement	ing the amendmer	reclassificatio it if not conta	n, or cancellation of ined in the amendme	issued shares, nt itself:
<u>provisio</u>	ons for implement	ing the amendmer	reclassificationt if not conta	on, or cancellation of ined in the amendme	issued shares, nt itself:
<u>provisio</u>	ons for implement	ing the amendmer	reclassificationt if not contain	on, or cancellation of ined in the amendme	issued shares, nt itself:
<u>provisio</u>	ons for implement	ing the amendmer	reclassificationt if not conta	n, or cancellation of ined in the amendme	issued shares, nt itself:
<u>provisio</u>	ons for implement	ing the amendmer	reclassificationt if not conta	on, or cancellation of ined in the amendme	issued shares, nt itself:
<u>provisio</u>	ons for implement	ing the amendmer	reclassificationt if not conta	on, or cancellation of ined in the amendme	issued shares, nt itself:

The date of each amendment(s) adoptic	on: AU	GUST	30 ^{HI}	2016	, if other than the
date this document was signed.					
Effective date <u>if applicable</u> :	(no more ti	han 90 days aft	er amendmen	t file date	
	(no more ti	ian 20 aays aji	ст ителител	i file dates	
Note: If the date inserted in this block of document's effective date on the Departm			tory filing re	quirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adopted by the shareholders was/were sufficient	oy the shareholders nt for approval.	. The number of	of votes cast for	or the amendment(s)	
The amendment(s) was/were approved must be separately provided for each					t
"The number of votes cast for th	e amendment(s) wa	s/were sufficien	nt for approva	1	
by	(voting group)			_,"	
	(voung group)				
☐ The amendment(s) was/were adopted action was not required.	by the board of dire	ectors without sl	hareholder ac	tion and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators	s without sharel	holder action	and shareholder	
Dated_O8	30/2016	Aur I	l.		
Signature		Altron	My		
(By a directo	r, president or other	officer – if dir	ectors or office	ers have not been	
selected, by appointed fig	an incorporator — if luciary by that fidu	in the hands of ciary)	f a receiver, tr	ustee, or other court	
				JALLOS.	
	(Typed or pri	inted name of p	erson signing)	
	Pe	ESIDE	JT		
	(Title of person	signing)		