

P16 0000 774/33

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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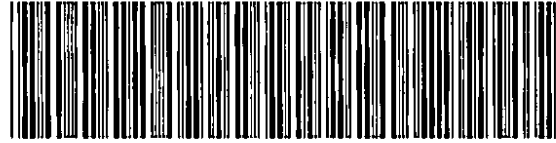
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PERFECT STRANGER PROJECT CORP
DOCUMENT NUMBER: P16000079433

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

Please return all correspondence concerning this matter to the following:

GILBERTO VALLADARES
Name of Contact Person
PERFECT STRANGER PROJECT CORP
Firm/ Company
12963 W OKEECHOBEE RD STE 3
Address
HIALEAH GARDENS, FL 33018
City/ State and Zip Code
4GLOBALCORP@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EVELYN BUENO at (786) 7286030
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

PERFECT STRANGER PROJECT CORP

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

P16000079433

(Document Number of Corporation (if known))

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:

THE ARTSTUDIO COMPANY INC

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**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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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 _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (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

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

THIS CORPORATION IS CONVERTING FROM A PROFIT TO A NON-PROFIT CORPORATION BECAUSE WE
WANT TO CONTRIBUTE AND INCREASE THE KNOWLEDGE ENRICHMENT OF OUR SOUTH FLORIDA
COMMUNITY.

THE SERVICES THAT WILL BE PROVIDED BY THE ORGANIZATION WILL FOCUS ON EDUCATIONAL
ACTIVITIES AND CLASSES FOR THE COMMUNITY. ESPECIALLY FOR CHILDREN WITH PARENTS/TUTORS
WITH LOW INCOME OR NOT INCOME AND CHILDREN WITH SPECIAL NEEDS. THE SERVICES ARE
DETAILED AS FOLLOWS:

-MUSICAL INSTRUMENT CLASSES

-DANCE CLASSES

-ART CLASSES

-LANGUAGE AND READING CLASSES

-CHOIR AND VOCAL CLASSES

-AFTERCARE FOR CHILDREN FROM 5 YEARS OLD TO 14 YEARS OLD FOCUSED ON HOMEWORK AND
FULL ACCESS TO ALL CLASSES AND ACTIVITIES DESCRIBED ABOVE.

**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)

GILBERTO VALLADARES 80% OF SHARES AND EVELYN BUENO 20% OF SHARES.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

11/21/2018
Dated _____

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)

EVELYN BUENO

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)