P95000073321

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
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NOV 0 5 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 2/4	orld wide Shoe Saces Cort
DOCUMENT NUMBER: PSSOOO	73321
The enclosed Articles of Amendment and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
BRUCE PONT	
3Pworldwi	Name of Contact Person Shoe Shies Conf Firm/ Company
2821 CENTE	Address
Pombro Beno	City/ State and Zip Code
E-mail address: (to be	sed for future annual report notification) er, please call:
BRUCE PONTIVET Name of Contact Person	at (<u>954</u>) <u>782-3244</u> or 954.536.410. Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	made payable to the Florida Department of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) 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

3P Worldwides	Thos SALES C	Erporation			
(Name of Corporation as cur	rently filed with the Florida	Dept. of State)			
P95000	0 73321				
(Document Nu	mber of Corporation (if know	vn)			
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Flo	orida Profit Corporatio	n adopts	s the f	following
A. If amending name, enter the new name of	of the corporation:				
BP worldwide	arl			The n	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro-	e designation "Corp," "Inc,"	" or "Co". A profession	orated' onal cor	" or t porati	he on
B. Enter new principal office address, if ap (Principal office address MUST BE A STREET				G	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			ATTACK SEED ON IN	NOV-4 PH 1:02	The second secon
D. If amending the registered agent and/or new registered agent and/or the new registered agent agen		Florida, enter the nam	e of the		
Name of New Registered Agent:		<u>.</u>			
New Registered Office Address:	(Florida street add	dress)			
		, Florida_			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a		d accept the obligations	of the p	osition	1.
	Signature of New Registered A	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)

Title Name Address Type of Action

Add Remove

Add Remove

Add

Remove

	If an amendment provides for provisions for implementing the (if not applicable, indicate N	e amendm			res,
	(J. 17)		 	 <u> </u>	
		<u> </u>	 	 	
			 	 <u></u>	
_			 	 	
_			 	 	

	1/2/18
The date of each amendment(s) a	doption:date of adoption is required)
Effective date if applicable:	
(no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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	
(voti	ing group)
aci 'n was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	03/09
Signature (Pk a dir	ector, president or other officer – if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court
	d fiduciary by that fiduciary)
•	BRUCE PONTHER
	(Typed or printed name of person signing)
	Pose
	(Title of person signing)
	(ruing or harpon pipump)