

474857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

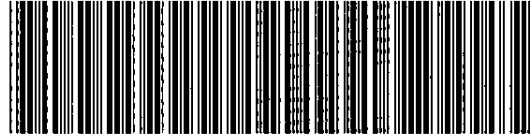
(Business Entity Name)

(Document Number)

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12/20/10--01030--019 \*\*52.50

FILED  
11 JAN - 6 PM 3:13  
SECRETARY OF STATE  
ALLAHUSSAINI, FLORIDA

*Amendment*

*1-6-11*

*Dc*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 29, 2010

JUDY L. FRANKLIN  
WALTER DICKINSON, INC.  
ONE INDEPENDENT DR., #2401  
JACKSONVILLE, FL 32202

SUBJECT: WALTER DICKINSON, INC.  
Ref. Number: 474857

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE PAGE 1 OF THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 410A00030010

*According to our file copy*

*Page 1 was sent with original documents. The Check was attached to Page 1. Since the Check did not come back, I am assuming you have it awaiting the return of this letter.*

*Please call me on my direct line (904) 861-1102 if you should have any questions.*

*Thank You,  
Judy L. Franklin*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Walter Dickinson, Inc.

DOCUMENT NUMBER: 474857

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

Please return all correspondence concerning this matter to the following:

Judy L. Franklin  
Name of Contact Person

Walter Dickinson, Inc.  
Firm/ Company

One Independent Drive, # 2401  
Address

Jacksonville, Florida 32202  
City/ State and Zip Code

judy.franklin@colliers.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert W. Selton, III at (904) 358-1206  
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:

- \$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

FILED  
11 JAN - 6 PM 3:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Walter Dickinson, Inc.

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

474857

(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 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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

Robert W. Selton, III

New Registered Office Address:

1 Independent Dr. #2401

(Florida street address)

Jacksonville

(City)

Florida 32202

(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.*

RW Selton III

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>
<u>CEO</u>	<u>Walter D. Dickinson</u>	<u>One Independent Drive</u> <u>Suite # 2401</u> <u>Jacksonville, Fl.</u> <u>32202</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>CEO</u>	<u>Robert W. Selton, III</u>	<u>One Independent Drive</u> <u>Suite # 2401</u> <u>Jacksonville, Fl.</u> <u>32202</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>COO</u>	<u>Charles B. Diebel</u>	<u>One Independent Drive</u> <u>Suite # 2401</u> <u>Jacksonville, Fl.</u> <u>32202</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**      *See additional page 2*  
 (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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**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
VP	Hobart Toost, Jr.	One Independent Dr. Suite # 2401 Jacksonville, Fl. 32202	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input 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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The date of each amendment(s) adoption: December 14, 2010  
(date of adoption is required)

Effective date if applicable: N/A  
(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.

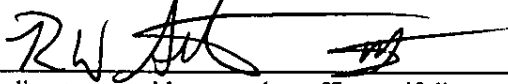
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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 12/14/10

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)

Robert Warren Seltzer, III  
(Typed or printed name of person signing)

CEO, President  
(Title of person signing)