553055

<u> </u>	
(Requestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	John R. Wood, Inc.
DOCUMENT NUMBER:	553055
The enclosed Articles of Amendo	nent and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
	Jane E. Miller
	Name of Contact Person
	John R. Wood, Inc.
	Firm/ Company
	9130 Corsea Del Fontana Way
	Address
	Naples, FL 34109
	City/ State and Zip Code
	jmiller@johnrwood.com
E-ma	il address: (to be used for future annual report notification)
For further information concernit	at (
Name of Contact	Person Area Code & Daytime Telephone Number
Enclosed is a check for the follow	ving amount made payable to the Florida Department of State:
	3.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee tificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Co P.O. Box 6327 Tallahassee, FI	Amendment Section Proporations Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

John R. Wood, Inc.

(Name of Corporation	on as currently filed with the Flo	orida Dept. of State)	
	553055		
(Docum	ent Number of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corp	poration adopts the following ame	endment(s) to
A. If amending name, enter the new name of the co	rporation:		
		777	
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered." "professional association," or the abbrev	or "Co". A professional corp	rporated" or the abbreviation "Co	
B. Enter new principal office address, if applicable		Ş	2
(Principal office address MUST BE A STREET ADD			
		•	<u> </u>
	-		572 -
C. Enter new mailing address, if applicable:	3/1		Ē. :
(Muiling address MAY BE A POST OFFICE BO)	<u> </u>		لايه ب
			w
			
D. If amending the registered agent and/or register		er the name of the	
new registered agent and/or the new registered of	office address:		
Name of New Registered Agent			
	(Florida street address)		
	a toriga sireet agaressy		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
N			
New Registered Agent's Signature, if changing Registered Agent the appointment as registered agent.		obligations of the position.	
,,,,,		The second secon	
Signa	ture of New Registered Agent, if c	hanging	
·	,		
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u> <u>John</u>	<u>i Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	AVP	Paul E. Boca	9130 Corsea Del Fontana Way
Add			Naples, FL 34109
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach ada	ng or adding additional Ar litional sheets, if necessary).	. (Be specific)			
					
				···	
		-			
If an amen	idment provides for an exc	change, reclassifica	ation, or cancella	tion of issued sha	ires,
provision (if no	s for implementing the am tapplicable, indicate N/A)	endment it not co	ntained in the an	<u>iendment itself:</u>	
					
					
	·				·

	11/30/2020	
The date of each amendment(s) adoption the date this document was signed.	otion:	, if other than th
date this document was signed.	11/30/2020	
Effective date <u>if applicable</u> :		
	(no more than 90 day	s after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depa		statutory filing requirements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		aber of votes cast for the amendment(s)
☐ The amendment(s) was/were appro must be separately provided for ea		voting groups. The following statement separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were su	ificient for approval
by		"
	(voting group)	
November 3	0. 2020	
Dated		<u>.</u>
	The Hood	
Signature	<u> </u>	2012
		if directors or officers have not been ds of a receiver, trustee, or other court
	fiduciary by that fiduciary)	
	Phillip R. Woo	d
	(Typed or printed name	of person signing)
	President	

(Title of person signing)