(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: STANLE	Y WINES & MURP	HY, P.A.
DOCUMENT NUME	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Micha	el B. Murphy	
		Name of Contact Perso	n
		Firm/ Company	
	106 A	venue F, SW	
		Address	
	Winte		3880
		City/ State and Zip Coc	le
	E-mail address: (to be us	sed for future annual repor	notification)
For further information	n concerning this matter, pleas	se call:	
Michael	BMurphy	at (863	299-1263
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	XX\$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)
	ling Address	Street	Address
	endment Section		dment Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			
Tallahassee, FL 32314			Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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	<u> </u>	Titler
led with the Florida Dept. of State)	HALEANASSEE, IE	
rphy & Helms, P.A.		10.1
Corporation (if known)		
Statutes, this Florida Profit Corpora	ation adopts the following	amendmen
rporation:		
P.A.		The new
<u>:</u> DRESS)		
<u></u>		
red office address in Florida, enter to	the name of the	
Michael B. Murphy		
106 Avenue F, SW		
(Florida street address)	<u> </u>	
(Florida street address)	Florida 33880 (Zip Code)	
	rphy & Helms, P.A. Corporation (if known) Statutes, this Florida Profit Corporation: P.A. d "corporation." "company." or " "Inc." or "Co". A professional abbreviation "P.A." in the profit company of the professional abbreviation "P.A." in the profit company of the professional abbreviation "P.A." in the profit company of the professional abbreviation "P.A." in the profit company of the	rphy & Helms, P.A. Corporation (if known) I Statutes, this Florida Profit Corporation adopts the following orporation: P.A. d "corporation." "company." or "incorporated" or the above abbreviation "P.A." i DRESS) Red office address in Florida, enter the name of the office address:

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)

Evample

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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P/D Larry S. Helms	106 Avenue F, SW
Add		Winter Haven, FL 33880
X Remove		
2) X Change	P/D Michael B. Mur	phy 106 Avenue F, SW
Add		Winter Haven, FL 33880
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add	_	
Remove		
o 🔲 a		
6) Change		
Add		
Remove		

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
If an amandment provides for an evol-	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

date this document was signed.	loption: December 19, 2014	, if other than th
Effective date if applicable:	January 1, 2015	
 	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved 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		
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Date Decemb e	er 19, 2014	
Signature	USOS Munda	
(By a di	rector, president or other office if directors or officers have not been	
	I, by an incorporator – if in the halds of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
арроті	ed riddelary by that riddelary)	
	Wichael B Wuralu	
	(Typed or printed name of person signing)	
	(Title of poreon signing)	