600675

| questor's Name) | |
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SEP 25 2015 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Babbitt & Johnson, P.A. | | | | | |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| DOCUMENT NUMBER: 600675 | | | | | |
| The enclosed Articles of Amendment and fee are so | ubmitted for filing. | | | | |
| Please return all correspondence concerning this ma | atter to the following: | | | | |
| Theodore Babbitt | | | | | |
| | Name of Contact Person | | | | |
| Babbitt, Johnson, Osborne, & | & LeClainche, P.A. | | | | |
| | Firm/ Company | | | | |
| 1641 Worthington Road, Suite 100 | | | | | |
| | Address | | | | |
| West Palm Beach, FL 33409 |) | | | | |
| | City/ State and Zip Code | | | | |
| TedDakkin@Dakkin Jahanna | | | | | |
| TedBabbitt@Babbitt-Johnson.com | | | | | |
| E-mail address: (to be u | sed for future annual report notification) | | | | |
| For further information concerning this matter, plea | se call: | | | | |
| Theodore Babbitt | at () 684-2500 | | | | |
| 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 \$\sum \text{Certificate of Status}\$ | □\$43.75 Filing Fee & □\$52.50 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

FILIED SECRETARY OF STATE DIVISION OF COMPORATION

15 SEP 21 AM 8: 37

| Babbitt & Johnson, P.A. | · |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| (Name of Corporation | as currently filed with the Florida Dept. of State) |
| 600675 | |
| (Documen | nt Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation: | Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) |
| A. If amending name, enter the new name of the corp | poration: |
| Babbitt, Johnson, Osborne, & LeClainche, P.A. | 777 |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab | "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A." |
| D Enton now principal office address if anniversity | N/A |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.) | (ESS) |
| | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A |
| | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered off | |
| Name of New Registered Agent N/A | |
| | |
| | (Florida street address) |
| New Personal Office Add | m · · |
| New Registered Office Address: | , Florida |
| | |
| | |
| New Registered Agent's Signature, if changing Regist | |
| i nerevy accept the appointment as registered agent. I a | am familiar with and accept the obligations of the position. |
| | |
| | |
| Signatu | ure 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)

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 <math>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.

| Example: X Change | <u>PT</u> | John Do | <u>e</u> | | | |
|----------------------------|--------------|----------|-------------|---|---|-----------------------------------------|
| X Remove | <u>v</u> | Mike Jor | <u>nes</u> | | | |
| X Add | <u>sv</u> | Sally Sm | <u>iith</u> | | | |
| Type of Action (Check One) | <u>Title</u> | | Name | | | <u>Addres</u> s |
| 1) Change | | | N/A | | _ | |
| Add | | | | | | |
| Remove | | | | | | |
| 2) Change | | _ | | | _ | *************************************** |
| Add | | | | | | |
| Remove | | | | | | |
| 3) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | _ | | | _ | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | - | _ | | |
| Add | | | | | | |
| Remove | | | | | | · . |
| 6) Change | | | | | | |
| Add | | _ | | | | |
| Remove | | | | | | |

| C. If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific) |
|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| J/A | |
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| If an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | nument is not contained in the sidendment itself. |
| /A | |
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| | August 5, 2015 | STORES IL CE |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| The date of each amendment(s) added this document was a signal | doption: | DIVISITE OF CORPORAL CAR |
| date this document was signed. N/A | | • |
| Effective date <u>if applicable</u> : | | 15 SEP 21 AH 8: 37 |
| | (no more than 90 days after amen | dment file date) |
| Note: If the date inserted in this bedocument's effective date on the De | plock does not meet the applicable statutory fili- epartment of State's records. | ng requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes afficient for approval. | cast for the amendment(s) |
| | proved by the shareholders through voting group each voting group entitled to vote separately or | |
| "The number of votes east | for the amendment(s) was/were sufficient for ap | proval |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were add action was not required. | opted by the board of directors without sharehold | ler action and shareholder |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder a | ction and shareholder |
| Dated | | |
| Signature | Dealer Belled | |
| (By a d selecte | lirector, president or other officer – if directors or if directors or directors or an incorporator – if in the hands of a receive ted fiduciary by that fiduciary) | |
| | THEODORE BAB | B177 |
| | (Typed or printed name of person signature) | gning) |
| | PRESIDENT | |
| | (Title of person signing) | |

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