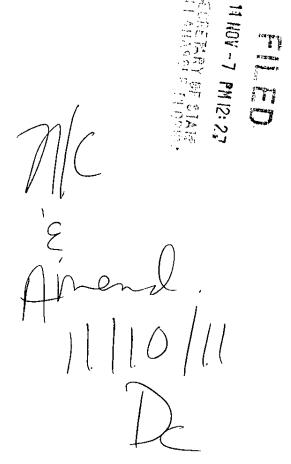
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Troutman, Willia	ıms, Irvin, Green, Helms, Polich & Hemphill, PA
DOCUMENT NUMBER: 602539	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this i	matter to the following:
Arlene Blake	
Name of	Contact Person
Troutman, Williams, Irvin, Gree	en, Helms, Polich &Hemphill, P.A.
Firm/	Company
311 W Fairbanks Avenue	
	ddress
Winter Park, Florida 3278	9 e and Zip Code
City/ State	e and Zip Code
ablake@troutmanwilliams	S.COM or future annual report notification)
For further information concerning this matter, pl	·
Arlene Blake	at ( 407 ) 647-2277
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	\$43.75 Filing Fee & S52.50 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

### TROUTMAN, WILLIAMS, IRVIN, GREEN, HELMS, POLICH & HEMPHILL, P.A.

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

602539		
(Document Number of Cor	poration (if known)	
ursuant to the provisions of section 607.1006, Florida ollowing amendment(s) to its Articles of Incorporation:	Statutes, this Florida Profit	Corporation adopts th
If amending name, enter the new name of the corpo	ration:	
routman, Williams, Irvin, Green, Helms &	Hemphill, P.A.	
he new name must be distinguishable and contain incorporated" or the abbreviation "Corp.," "Inc.," or Co". A professional corporation name must co ssociation," or the abbreviation "P.A."	Co.," or the designation "	'Corp,'" "Inc." or
T		10
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE	<b>CC</b> )	
The office dualess MOST BE A STREET ADDRE	<u>33</u> )	
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Enter new mailing address, if applicable:		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
(Mailing address MAY BE A POST OFFICE BOX)		- Thinks
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. If amending the registered agent and/or registered of		er the name of the
new registered agent and/or the new registered office	e address:	
Name of New Registered Agent:		
Hame of New Registered Agent.		_
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
	• • •	, ,
ew Registered Agent's Signature, if changing Register in the appointment as registered agent. I sition.	'ed Agent: ' am familiar with and accep	ot the obligations of th
		<del></del>
Signature of	New Registered Agent, if cha	nomo

## If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>	Address
1)P	Russell Troutman	311 West Fairbanks Avenue
-,		Winter Park, Florida 32789
2) <u>VP</u>	Joseph Williams	311 West Fairbanks Avenue Winter Park, Florida 32789
3) Secretary	Paul Irvin	311 West Fairbanks Avenue
		Winter Park, Florida 32789
4) Director	Robert F. Green	311 West Fairbanks Avenue Winter Park, Florida 32789
5) Director	Roger D. Helms	311 West Fairbanks Avenue Winter Park, Florida 32789
6) <u>Director</u>	Robert N. Hemphill	311 West Fairbanks Avenue Winter Park, Florida 32789
If REMOVING removed:	an officer and/or director, plea	se list the title(s) and name of the officer/director to
Title(s)	<u>Name</u>	<u>Title(s)</u> <u>Name</u>
1)Director	Joseph Polich	4)
2)		5)
3)		6)

attach additional sheets, if necessary).	(Be specific)
,	
<del></del>	
If an amendment provides for an exprovisions for implementing the am	change, reclassification, or cancellation of issued shares
If an amendment provides for an exprovisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares endment if not contained in the amendment itself:
provisions for implementing the am	change, reclassification, or cancellation of issued shares endment if not contained in the amendment itself:
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provisions for implementing the am	change, reclassification, or cancellation of issued sharesendment if not contained in the amendment itself:

The date of each amendment	(s) adoption: $10-31-2011$
• Effective date if applicable:	(date of adoption - required)
r, nective date <u>it applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/wa	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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)
	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated O	Hoper 31,7011
(By sele	a director, president or other officer – if directors or officers have not been octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Russell Troutman (Typed or printed name of person signing)
	(Title of person signing)