681464

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Craig A. Smith and Associates, Inc. DOCUMENT NUMBER: 681464 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Stephen C. Smith Name of Contact Person Craig A. Smith and Associates, Inc. Firm/ Company 21045 Commercial Trail Address Boca Raton, Florida 33486 City/ State and Zip Code ssmith@craigasmith.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stephen C. Smith Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Craig A. Smith & Associates, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 681464 (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 -(Florida street address) New Registered Office Address: (City) 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.

Signature of New Registered Agent, if changing

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)

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.

Example:

X Change PT John Doe X Remove V Mike Jones \underline{X} Add SV Sally Smith Type of Action <u>Title</u> Address Name (Check One) 1) X Change PD Stephen C. Smith 9960 Majorca Place Boca Raton, Fl 33434 ____ Add __ Remove 2) ____ Change ___ Add Remove PD Gene R. Schriner _ Change ___ Add Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ____ Add ___ Remove 6) ____ Change ____ Add __ Remove

E. If amo	mending or adding additional Articles, enter change(s) here:	
(Attacl	ach additional sheets, if necessary). (Be specific)	
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F. <u>If an a</u> prov	n amendment provides for an exchange, reclassification, or cancellation of issued shares ovisions for implementing the amendment if not contained in the amendment itself:	1
((if not applicable, indicate N/A)	
N/A		
<u> </u>		
		
		<u> </u>

June 29, 2020	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
July 30, 2020	
Effective date if applicable: (no more than 90 days after amendment file da	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	,
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without share action was not required.	cholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the a by the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
CAS Board of Directors	
(voting group)	
DatedSignature	
(By a director, president or other officer – if directors or officers hav selected, by an incorporator – if in the hands of a receiver, trustee, o appointed fiduciary by that fiduciary)	
Stephen C Smith	
(Typed or printed name of person signing)	
Vice President/Director	
(Title of person signing)	