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10/02/13

COVER LETTER

TO: Amendment Sec Division of Corp			·	٠
NAME OF CORPO	RATION: Earnest &	Associates, Inc		
DOCUMENT NUM				
	of Amendment and fee are su	ibmitted for filing.		
Picase return all corre	spondence concerning this ma	tter to the following:		
	Tim Foreman			
		Name of Contact Person	n	
	Earnest & Associ	iates, Inc		
		Firm/ Company		
	1526 Ponce de L	eon Blvd	•	
		Address		
	Coral Gables, FL		<u> </u>	
		City/ State and Zip Cod	e	
•				
	E-mail address: (to be u	sed for future annual report	notification)	
	•	•	•	
For further information	on concerning this matter, pleas	se call:		
Tim Forema	n	10 2N	T @ DOR WAL	7
Name	of Contact Person	Arca Co	de & Daytime Telephone Number	
- · ·			•	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	utment of State:	
■ \$35 Filing Fee	☐\$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)	
	iling Address		Address	
	endment Section		ment Section	
	ision of Corporations . Box 6327		on of Corporations Building	
	lahassee, FL 32314	2661 E	executive Center Circle	

•	Articles of Amendment		
• •			C
	to Articles of Incorporation	•	설심 를
	of		77.34
arnest & Associates, In-	c.		- 公理 - サベ
	currently filed with the Florida Dept. of	State)	- ia :
41063			
	t Number of Corporation (if known)		_ 100 m
rsuant to the provisions of section 607.1 Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit C</i>	Corporation adopts the following	TATE:
If amending name, enter the new na	me of the corporation:	·	
			The new
Euter new principal office address, brincipal office address <u>MUST BE A SI</u>			- -
Enter new mailing address, if applications address MAY BE A POST C			
(Mailing address <u>MAY BE A POST C</u>	Vor registered office address in Florids.	enter the name of the	
(Mailing address MAY BE A POST C	Vor registered office address in Florids.	enter the name of the	
(Mailing address MAY BE A POST C	DFFICE BOX) d/or resistered office address in Florids, registered office address;		
(Mailing address MAY BE A POST C	Vor registered office address in Florids, registered office address: Tim Foreman	1	
If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	New registered office address in Florids. Tim Foreman 1526 Ponce de Leon Blvo		

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director	r 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 Joh	n Doe	,
X Remove	Y Mik	te Jones	
_X Add	SV Sail	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
i) Change	DP	Walter G. Earnest, Jr.	1526 Ponce de Leon Blvd
Add			Coral Gables, FL 33134
X Remove	•		<u> </u>
2) Change	Pres	Tim Foreman	1526 Ponce de Leon Blvd
X_Add	•		Coral Gables, FL 33134
Remove			
3) Change	<u>VP</u>	Tim Foreman	10650 SW,77th Court
Add			Pinecrest, FL 33156
X Remove			
4) Change			
Add		•	
Remove	•		
5) Change			·
Add			<u> </u>
Remove			
6) Change			
Add			
Remove		•	<u> </u>

Page 2 of 4

Tamending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)				ets, if necessary).	(Be specific)				., .
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if npplicable: (no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	,
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/1/13	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Tim Foreman	
(Typed or printed name of person signing)	
Vice -President	
(Title of person signing)	•