F60799

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SECRETARY OF STATE

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C. LEWIS

MAY 22 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Westerman	White Zetrouer	, P.A.			
DOCUMENT NUMBER: F60799					
The enclosed Articles of Amendment and fee are sub	mitted for filing.				
Please return all correspondence concerning this matt	er to the following:				
Marielle Westerm	an				
·	Name of Contact Person	1			
Westerman Zetro	uer, P.A.				
	Firm/ Company				
146 2nd Street N.	Ste. 100				
	Address				
St. Petersburg, Fl	_ 33701				
	City/ State and Zip Code	e			
mwootormon@www.le					
mwesterman@wwz-la					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Marielle Westerman	727	_ ₎ 329-8956			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street	Address			
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		Building Vecutive Center Circle			

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

14 MAY -9 AM 9: 33

SECRETARY OF STATE FALLAHASSEE, FLORIDA

Westerman White Zetrouer, P.A.	FALL AHASSEE, PLUMBIN
(Name of Corporation as currently filed with th	e Florida Dept. of State)
F 60799	
(Document Number of Corporatio	n (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	<u>.</u>
Westerman Zetrouer, P.A.	The new
name must be distinguishable and contain the word "corpord "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	146 2nd Street N.
B. Enter new principal office address, it applicable: (Principal office address MUST BE A STREET ADDRESS)	Ste. 100
	St. Petersburg, FL 33701
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	146 2nd Street N.
(Mutting address MAT BE A FOST OFFICE BOA)	Ste. 100
	St. Petersburg, FL 33701
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	, Florida City) (Zip Code)
	(Zip Code)

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

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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_	 	
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

tach additional sheets, if necessary).	(Be specific)			
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•				
				•
		<u> </u>		
an amendment provides for an exc	hanga raclassifis	etion or cance	Hatian of issues	l charec
rovisions for implementing the amo	endment if not co	ntained in the	amendment itse	lf:
(if not applicable, indicate N/A)				
		<u></u>		
., 				

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The date of each amendment(s) adoption:	14 HAY -9 AM 9: 33	, if other than the
date this document was signed.	SECRETARY OF SHATE	
Effective date <u>if applicable</u> :	TATE ANACCEF ALGRIBA	
•	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the shappy by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amendment(s) proval.	
	hareholders through voting groups. The following statement roup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amenda	ment(s) was/were sufficient for approval	
by	,,,	
(voling	g group)	
The amendment(s) was/were adopted by the bo action was not required.	ard of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder	
Dated 5-1-14		
Signature		
(By a director, preside	ent or other officer - if directors or officers have not been	
selected, by an incorp appointed fiduciary b	orator – if in the hands of a receiver, trustee, or other court y that fiduciary)	
00 -	all a 1 20 a 1 a 20 a 2	
	(Typed or printed name of person signing)	
	(Title of person signing)	
·	(Title of person signing)	