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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: WEBER & TINNEN STRUCTURAL ENGINEERS, P.A. Name of Corporation
DOCUMENT NUMBER: CHARTER NUMBER G18537
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
WERER & TINNEN STRUCTURAL ENCOINEERS, P.A. Firm/Company
5379 CENTRAL AVE Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
WILLIAM F WEPFE III at (727) 2727-6100 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$43.75 Filing Fee & Certificate of Status S43.75 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 SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

WERER & TINNEN STRUC (Name of Corporation as currently	FIVEAL FLYEIN filed with the Florida Dept. of State)	EERS, LA
G18537 CHARTER Number of	BER	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation;	Florida Profit Corporation adopts the fo	Howing amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword" chartered," "professional association," or the abbreviation "F	🗭 . A professional corporation name	the abbreviation must comain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	5329 CENTRA	·
	33710	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		
Name of New Registered Agent Doc 1	• •	
5329 CEN	TRAL AVE.	
New Registered Office Address: TETE	City)	33]10 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the pos	ition.
Signature of New Re	egistered Agent, if changing	
		MY 29 P

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 De	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	SI	• —	MICHAELTINHEN	13600 RUSTIC PINES PEVD.
Add				SEMINOLE, FL.
Remove				33176
2) Change	45	T	DARYL P. HOBBON	9098 127TH LANE
Add				SEMINOLE, FL.
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	. (Be specific)	ange(s) here:			
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f an amendment provides for an exc	change, reclass	ification, or ca	ncellation of i	sued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	ienament ii not	contained in t	ne amenomen	CHSCIE:	
				-	
				•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment fil	le date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for t by the shareholders was/were sufficient for approval.	he amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	ollowing statement endment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	l shareholder
Dated 5/10/2018	
Signature At T	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, trusted	
appointed fiduciary by that fiduciary)	ce, of other court
(Typed or printed name of person signing)	<u>-UI</u>
PEFSIDEHT	
(Title of person signing)	