G32573

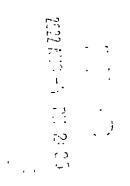
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| NAME OF CORPO | DRATION: John B. Webb & A | ssociates, Inc. | | | | |
|------------------------|---|--|--|---|---|------|
| DOCUMENT NUM | | | | | | |
| | ns of Amendment and fee are su | bmitted for filing. | | | | |
| Please return all corr | respondence concerning this ma | tter to the following: | | | | |
| | Jacqueline E. Webb, Presiden | ŧ | | | | |
| | | Name of Contact Persor | 1 | | | |
| | John B. Webb & Associates, | Inc. | | | | |
| | | Firm/ Company | · **** | | | |
| | 925 S. Denning Drive, Suite | 3 | | | | |
| | | Address | | | | |
| | Winter Park, Florida 32789 | | | | | |
| | | City/ State and Zip Code | e | | | |
| | jackie.webb@webbengr.com | | | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | | |
| For further informati | ion concerning this matter, pleas | se call: | | ! | r-3 | |
| Jacquetine E. Webb | | 407 at (| de & Daytime Telephone Number | | 2 3 5 7 | |
| Name | e of Contact Person | Area Co | de & Daytime Telephone Number | | 1 | |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: | : | 2-7 | - |
| ■ \$35 Filing Fee | S43.75 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) | | : :::::::::::::::::::::::::::::::::::: | - 4- |
| Ai | ailing Address mendment Section ivision of Corporations | Amend | Address Iment Section on of Corporations | | | |

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

John B. Webb & Associates, Inc.

| John B. Weod & Associates, Inc. | | | | |
|---|--------------------------------|--|--|---|
| (Name c | of Corporation as currently | filed with the Florida D | ept. of State) | |
| G32573 | | | | |
| | (Document Number of | Corporation (if known) | | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this F | Florida Profit Corporation | adopts the following | ng amendment(s) |
| A. If amending name, enter the new na | ame of the corporation: | | | |
| N/A | | | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Cochartered," "professional association," | Corp," "Inc," or "Co". A | ompany," or "incorporate professional corporation | ed" or the abbreviati name must conta | ion "Corp.," |
| B. Enter new principal office address, | if applicable: | N/A | | |
| (Principal office address MUST BE A S | | | | |
| | | | | |
| | | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | N/A | | |
| | | | | |
| | | | | |
| D. If amending the registered agent ar | nd/or registered office addr | ess in Florida, enter the | name of the | 7 D P P P P P P P P P P P P P P P P P P |
| new registered agent and/or the new | | _ | | € ". 3. 7 |
| Name of New Registered Agent | N/A | | | |
| | | | | , |
| | (Florida stre | vet address) | | .sa *** |
| New Registered Office Address: | N/A | | . Florida | (.) |
| | - | (City) | (Zip | Code) |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if c Thereby accept the appointment as regis | | | tions of the position | |
| Thereby accept the appointment as region | ierea agemi. Tam jaminar n | and accept the conga- | tons of the positions | |
| | | | | |
| | | | | |
| | Signature of New Re | egistered Agent, if <mark>cha</mark> ngir | ıg | |
| Check if applicable | | | | |
| ☐ The amendment(s) is/are being filed p | oursuant to s. 607.0120 (11) (| (c), 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.

| X Change | <u>PT</u> | John Doe | |
|----------------------------|--------------|-------------|-----------------------|
| X Remove | <u>V</u> | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| i) Change | VP | Paul Horen | 925 S. Denning Drive |
| X Add | | | Winter Park, FL 32789 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | _ | |
| Add | | | |
| Remove | | | |

| E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach <i>additional sheets, if necessary).</i> (Be specific) | | |
|--|--|--|
| N/A | | |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | | |
| (if not applicable, indicate N/A) | | |
| N/A | | |
| | | |
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| . • • | |
| The date of each amendment(s) addate this document was signed. | loption:, if other than the |
| Effective date if applicable: | |
| · · · · · · · · · · · · · · · · · · · | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this b document's effective date on the De | ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes east for the amendment(s) ficient for approval. |
| ☐ The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): |
| | for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| July 18, 202 Dated | · · · · · · · · · · · · · · · · · · · |
| /xelected | rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary) |
| | Jacqueline E. Webb |
| • | (Typed or printed name of person signing) |
| | President |
| • | (Title of person signing) |