437354

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Bryant, Higby and	Barr, Chartered			
DOCUMENT NUM					
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Catherine M. Neese				
		Name of Contact Person			
	Bryant, Higby, & Barr, Chartered				
		Firm/ Company			
	833 Harrison Avenue				
		Address			
	Panama City FL 32401				
		City/ State and Zip Code			
one	ese@bryanthigby.com				
-		sed for future annual report i	notification)		
For further informati	on concerning this matter, pleas	se call:			
Catherine M. Neese		at (850	763-1787		
Name	e of Contact Person	Area Coc	_) le & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:		
□ \$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)		
Ai Di P.	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amenda Division Clifton	Address ment Section n of Corporations Building kecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Bryant, Higby and Barr, Chartered		
(Name of Corporation	as currently filed with the Flor	ida Dept. of State)
G37354		
(Documen	nt Number of Corporation (if kno	wn)
Pursuant to the provisions of section 607.1006, Florida State Articles of Incorporation:	tatutes, this Florida Profit Corpe	oration adopts the following amendment(s)
A. If amending name, enter the new name of the corp	oration:	
Bryant, Higby, & Barr, Chartered		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"Inc," or "Co". A professiona	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>
		<u> </u>
D. If amending the registered agent and/or registered	Laffice address in Florida, ento	r the name of the
new registered agent and/or the new registered off		I the name of the
Name of New Registered Agent N/A		
	(Florida street address)	
Now Ranistarad Office Addresse		Elorida
inen regimerea Office radio cas.	(City)	(Zip Code)
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a		bligations of the position.
Signatu	ire of New Registered Agent, if ci	hanging

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 Do	<u>ue</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>SV</u>	Sally Su	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change		-	<u></u>	
Add				
Remove				
6) Changa				
6) Change		_		
Add				
B (*11161324)				

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	

	January 1, 2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	1 2010	
Effective date if applicable:	January 1, 2018	
n apprecion.	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(see sufficient for approval.	:)
	approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	m
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	N.	
·,	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	:r'
April 5 Dated	. 2018	
se	y a director president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other courpointed fiduciary by that fiduciary)	1
	Clifford C. Higby	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	