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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Thomas D. Wood ar	nd Company		
DOCUMENT NUM	106796		<u> </u>	
The enclosed Articles	s of Amendment and fee are sub	mitted for filing.		
Please return all corre	espondence concerning this matt	er to the following:		
	Jeffrey L. Baxter, Esq.			
	Name of Contact Person			
	Law Offices of Jeffrey L. Baxter, P.A.			
	Firm/ Company			
	One Datran Centre, 9100 S. Dadeland Blvd., Suite 700			
	Address			
	Miami, Florida 33156			
	City/ State and Zip Code			
	JBaxter@Belaw.net			
	E-mail address: (to be use	d for future annual report r	notification)	
	n concerning this matter, please			
Jeffrey L. Baxter, Esc	. 	at (at		
Name	of Contact Person		e & Daytime Telephone Number	
Enclosed is a check for	or the following amount made pa	yable to the Florida Depar	tment of State:	
S35 Filing Fee	S43.75 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)	
	ling Address	Street A		
	endment Section		nent Section	
	Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Thomas D. Wood and Company

	urrently filed with the Flo	orida Dept. of State)	
06786			
(Document Nu	umber of Corporation (if kn	own)	-
ursuant to the provisions of section 607.1006, Florida Statute s Articles of Incorporation:	es, this <i>Florida Profit Corp</i>	poration adopts the fo	llowing amendment
. If amending name, enter the new name of the corporat	tion:		
			The new
ame must be distinguishable and contain the word "corporati Inc.," or Co.," or the designation "Corp," "Inc," or "C chartered," "professional association," or the abbreviation	Co". A professional corp	rporated" or the abbroration name must	reviation "Corp.," contain the word
Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRESS</u>	)		
	-		<u>-:</u>
			•
Production 20 11 16 No. 14			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
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If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	ddress:		<del>.</del>
new registered agent and/or the new registered office ac	ce address in Florida, ente ddress:		<del></del>
Name of New Registered Agent	ddress:		·
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Name of New Registered Agent	ddress: rida street address)		
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Name of New Registered Agent  (Flor	ddress:		(Zip Code)
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent	rida street address)  (City)  Agent:	, Florida	•
Name of New Registered Agent  New Registered Agent  (Flow New Registered Office Address:	rida street address)  (City)  Agent:	, Florida	•
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent	rida street address)  (City)  Agent:	, Florida	•
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent	rida street address)  (City)  Agent:	, Florida	•
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent are family accept the appointment as registered agent. I am fam	rida street address)  (City)  Agent: niliar with and accept the or	, Florida bligations of the posi	•
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent are family accept the appointment as registered agent. I am fam	rida street address)  (City)  Agent:	, Florida bligations of the posi	•

## 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Kim Wood	9100 S. Dadeland Blvd., Suite 700
X Add			Miami, Florida 33156
Remove			
2) Change			
Add			
Remove 3) Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<u></u>
Pemove			

amending or adding additiona tach additional sheets, if necess	sary). (Be specific)			
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n amendment provides for an ovisions for implementing the	ı exchange, reclassific	cation, or cancella	tion of issued shar	es,
(if not applicable, indicate N	/A)	ontanied in the an	endment usen.	
C) II	•			
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	iment(s)
	pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
Novembe Dated	r 23rd, 2020	
Signature	WY	<del> </del>
<b>Lec</b> lect	director, president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or othen ted fiduciary by that fiduciary)	been er court
	Thomas D. Wood, Jr.	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	