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About the All States of the st

AMUND, 14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DBA Associ	ates, Inc.				
The enclosed Articles of Amendment and fee are sub-	mitted for filing.				
Please return all correspondence concerning this matter	er to the following:				
D. Randall Briley,	Esq.				
	Name of Contact Person	-			
Briley & Deal, LLC					
	Firm/ Company				
2215 South Third	Street, Ste. 101				
	Address				
lackson tilla Paga	, , , , , , , , , , , , , , , , , , , ,				
Jacksonville Beac	<u> </u>	· · ·			
	City/ State and Zip Code	3			
rbriley@jaxrelaw.com					
E-mail address: (to be use	ed for future annual report	notification)			
For further information concerning this matter, please call:					
D. Randall Briley, Esq.	at (904	285-5299			
Name of Contact Person		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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation of



DBA Associates, Inc.

(Downless Called at Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new name of the corporation:	•
ame must be distinguishable and contain the word "corporati	The net
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain th
. Enter new principal office address, if applicable:	c/o Wilmoth & Associates, PA
Principal office address <u>MUST BE A STREET ADDRESS</u>)	2317 Blanding Boulevard, Ste. 206
	Jacksonville, FL 32210
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office add new registered agent and/or the new registered of fice address	
	<u> </u>
Name of New Registered Agent	
Name of New Registered Agent	street address)
Name of New Registered Agent (Florida s New Registered Office Address:	, Florida
Name of New Registered Agent (Florida s	, Florida

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 <math>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>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	William J. Collins	129 Nandina Circle
Add			Ponte Vedra Bch, FL
Remove			32082
2) Change	PTD	Brenda Collins	1905 Crescent Drive
Add			Hiawassee, GA 30546
Remove			
3) Change	VSD	Lisa Collins	4839 Marsh Hammock
Add			Drive East
Remove			Jacksonville,FL
4) Change		_	
Add			
Remove			
5) Change		_	
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change		_	
Add			
Remove			

gammona shoots, if necessary).	rticles, enter change(s) here: (Be specific)	
		_
		_
		_
	_	
an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
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provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	1-14-14	
Signature	Sunda Collins	
(By a d	irector, president or other officer – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Brenda Collins	
	(Typed or printed name of person signing)	
	President, Treasurer, Director	
	(Title of person signing)	