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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Br	usiness Entity Nan	ne)
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Certified Copies	Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations WOLFSON & ASSOCIATES, P.A., CERTIFIED PUBLIC ACCOUNTANTS NAME OF CORPORATION: DOCUMENT NUMBER: L16616 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IRA KILTOK Name of Contact Person WOLFSON CPA FIRM GOMBERG * BIRKHOLZ * KILTOK, P.A. Firm/Company 2801 NORTH UNIVERSITY DRIVE, SUITE 306 Address CORAL SPRINGS, FL 33076 City/ State and Zip Code ikiltok@wolfsonassociates.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 341-6265 EXT 8

Area Code & Daytime Telephone Number IRA KILTOK Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

FILED

14 DEC 18 AH 11:59

WOLFSON & ASSOCIATES, P.A., CERTIFIED PUBLIC ACCOUNTANTS:

(Name of Corporation as currently filed with the Florida Dept. of State) | ARASSEE | LORIDA L16616 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If amending name, enter the new name of the corporation: WOLFSON CPA FIRM GOMBERG * BIRKHOLZ * KILTOK, P.A. name must be distinguishable und contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) N/A New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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 Do	<u>e</u>				
X Remove	V	Mike Jones					
X Add ·	<u>sv</u>	Sally Sn	nith				
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s			
1) Change	N/A		N/A	N/A			
Add							
Remove							
2) Change							
Add							
Remove							
3) Change		_					
Add							
Remove							
4) Change		_					
Add				-			
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

	(Be specific)
I/A	
	<u> </u>
If an amendment provides for an eyeb	nange reclassification or cancellation of issued shares
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: N/A	, if	f other than the
date this document was signed.		
Effective date if applicable: N/A		
(no more than 9	0 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	e number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders thromust be separately provided for each voting group entitled to	· · · · · · · · · · · · · · · · ·	
"The number of votes cast for the amendment(s) was/wer	re sufficient for approval	
by N/A	,,	
(voting group)		
The amendment(s) was/were adopted by the board of directors action was not required.	without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators with action was not required.	nout shareholder action and shareholder	
Dated_12/17/2014	2	
Signature		
	cer – if directors or officers have not been he hands of a receiver, trustee, or other court)	
IRA KILTOK		
(Typed or p	printed name of person signing)	
VICE-PRESIDENT		
(Ti	itle of person signing)	