N09000005337

| (Re | questor's Name) | - |
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| (Ad | dress) | |
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| DA) | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRUTARY OF STATE

Amend

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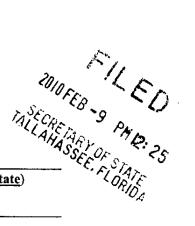
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: <u>CWC Regulat</u> | tors Inc. | |
|-------------------------|--|---|---|
| DOCUMENT NUM | BER: N09000005337 | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | espondence concerning this ma | tter to the following: | |
| | | ert P. Smith | |
| | (Name of | f Contact Person) | |
| | CWC F | Regulators Inc. | |
| | (Firm | n/ Company) | |
| | 16233 Brid | gecrossing Drive | |
| | (| Address) | |
| | Lithia. | Florida 33547 | |
| | | ate and Zip Code) | |
| | | lators@gmail.com | |
| | E-mail address: (to be use | ed for future annual report notific | ation) |
| For further information | on concerning this matter, pleas | se call: | |
| Robert P. Smith | | _{at (} 813) 205-553 | 34 |
| (Name | of Contact Person) | at (813) 205-553 (Area Code & Daytin | me Telephone Number) |
| Enclosed is a check for | or the following amount made [| payable to the Florida Departmen | t of State: |
| | □ \$43.75 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) |
| | ng Address | Street Address | |
| | idment Section ion of Corporations | Amendment Section Division of Corporation | ons |
| | Box 6327 | Clifton Building | |
| | nassee, FL 32314 | 2661 Executive Cente | r Circle |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



CWC Regulators, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N09000005337

| (Document Num | nber of Corporat | ion (if known) | |
|---|------------------|----------------------------------|--------------------------------|
| Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In | | , this <i>Florida Not For Pr</i> | ofit Corporation adopts |
| A. If amending name, enter the new name of | f the corporatio | <u>n:</u> | |
| The new name must be distinguishable and coabbreviation "Corp." or "Inc." <u>"Company" o</u> | | | rporated" or the |
| B. Enter new principal office address, if app | | | |
| (Principal office address <u>MUST BE A STREE</u> | T ADDRESS) | · | |
| | | | |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE) | | 16233 Bridgecrossin | ng Drive |
| | | Lithia, Florida 33547 | 7 |
| | | | |
| D. If amending the registered agent and/or registered agent and/or the new regis | | | er the name of the |
| Name of New Registered Agent: | | pert P. Smith | |
| Hame of New Registered Figure. | | ridgecrossing Dr. | - |
| New Registered Office Address: | | ida street address) | - |
| | | Lithia | _, Florida 33547 (Zip Code) |
| | | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing the language of the Appointment as registered to the second contract the second | | | t the obligations of the |
| position. | Rolf | PLI | |
| _ | | 7 m | |

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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------------------------------|--|-------------------|
| <u>s</u> | Stephanie Smith | 16233 Bridgecrossing Dr. Lithia, FL 33547 | □ Add ☑ Remove |
| <u>s</u> | Denny Randolph | 10770 US Hwy 19 North Apt. 805 Pinellas Park, Fl 33782 | |
| | | | |
| (attach | | specific) | Lucational |
| | | sively for charitable, religious, ed | |
| and scie | entific purposes, including, for su | ch purposes, the making of distr | ibutions to |
| organiza | itions that qualify as exempt orga | anizations under section 501 (c) | 3 of the Internal |
| Revenue | e Code, or corresponding section | n of any future federal tax code. | |
| (B) Upor | n dissolution of the organization, | assets shall be distributed for or | ne or more |
| exempt | purposes within the meaning of s | section 501 (c) 3 of the Internal F | Revenue Code, |
| or shall l | be distributed to the federal gove | ernment, or to a state or local go | vernment, for a |
| public pu | urpose. Any such assets not disp | posed of shall be disposed of by | the Court of |
| Commo | n Pleas of the county in which th | e principal office of the organiza | tion is then |
| located, | exclusively for such purposes or | r to such organization or organiz | ations, as said |
| Court sh | nall determine, which are organiz | red and operated exclusively for | such purposes. |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | | |
| | ····· | | |

| The date of each amend | dment(s) adoption: October 26, 2009 |
|---|--|
| | (date of adoption is required) |
| Effective date <u>if applica</u> | |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendme | nt(s) (<u>CHECK ONE</u>) |
| ☑ The amendment(s) w was/were sufficient for | ras/were adopted by the members and the number of votes cast for the amendment(s) or approval. |
| There are no membe adopted by the board | ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors. |
| Dated_ | 26 October 2009 |
| Signat | oure Robt P Ind |
| J | (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary) |
| | Robert P. Smith |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |

Page 3 of 3