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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	WII BUILLD, INC DN:					
	N1000000893					
The enclosed Articles of Am						
Please return all corresponde	ence concerning this matt	er to the following	<u>;</u> :			
Rodney Burgess						
	······································	(Name of Contac	t Person)			
		(Firm/ Comp	oany)			
5200 NW 33rd Ave Ste 200	#AM115					
		(Address)			
Fort Lauderdale, FL 33309						
		(City/ State and 2	(ip Code)			.
Burgess567@yahoo.com						
E	-mail address: (to be used	d for future annua	report no	tilication	1)	
For further information conc	erning this matter, please	e call:				ECR TAI
Rodney Burgess			954 at		471-9254	SECRETAL TALLAH
	(Name of Contact Person	1)		Code)	(Daytime Tele	
Enclosed is a check for the f	ollowing amount made p	ayable to the Flori	da Depart	ment of	State:	phone Number) 位子。日
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing I Certified Copy (Additional co- enclosed)		Certifi Certifi	Filing Fee leate of Status led Copy tional Copy is sed)	TATE
<u>Mailing A</u> Amendme Division o			Street Ad Amendm Division	ent Secti		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

WIEBUILLD, INC

(Name of Corporation as currently filed with the Florida Dept. of State) 10000000893 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 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: (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) New Registered Office Address: (City) (Zip Code) 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 Doc 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 X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add		N/A	<u>.</u> .
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
51 Change Add			SECRETATION OF STAT
Remove			21. J
6) Change Add			PH 1: 50
Remove .			FAE
E. If amending or addin (attach additional sheet	g additional Ar ts, if necessary).	ticles, enter change(s) here: (Be specific)	
ADD PROVISIONS:			
The organization is organ	ized exclusively	for charitable and educational purposes under	Section 501c3 of the Internal
Revenue Code.			
Upon dissolution of the or	ganization, asse	ts shall be distribtuted for one or more exempt	purposes within the meaning of

section 501(c)(3) of the Internal Re	evenue Code, or corresponding section of any future federal tax code,	or shall be	
distributed to the federal government	nt, or to a state or local government, for a public purpose.		
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		382	
		2023 HAY 19 SECRETAR TALLAH	11
			Carlos Carlos
The date of each amendment(s) a	doption:	ETAR other than the	. []
late this document was signed.		SEC 3	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
		m	
Note: If the date inserted in this blo locument's effective date on the De	ock does not meet the applicable statutory filing requirements, this da epartment of State's records.	te will not be listed as the	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the amendm	eent(s)	

Dated	05/15/2023
Signature	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, or other court appointed fiduciary by that fiduciary)
	Rodney Burgess
	(Typed or printed name of person signing)
	CEO

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

SECRETARY OF STATE TALLAHASSEE, FL

2023 MAY 19 PM 1: 50