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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: W.E.G. Corporation
DOCUMENT NUMBER: NIVOODOO2409
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kimberty Pratt (Name of Contact Person)
W.E.G (Firm/ Company)
(Firm/ Company)
3125 S.W 128th Avenue, Miramar, FL. 33027
(Address)
(City/ State and Zip Code)
Prattkimberty 84@ yahas.com E-mail address: (to be used for future asshual report notification)
E-mail address: (to be used for future ashual report not tration)
For further information concerning this matter, please call:
Kimberly Pratt at 954-778-1751
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy 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**

to

Articles of Incorporation of

W.E.G CORPORK	HOITF		
(Name of Corporation as current	y filed with the Flori	da Dept. of State)	
N16000003	.409		
(Document Numbe	r of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For</i>	Profit Corporation adopts	the following
A. If amending name, enter the new name of the corporation	on:		The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated"	" or the abbreviation "Corp	
B. Enter new principal office address, if applicable:	N/A		_
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	<del>//</del>	> 00 E E	016
		in the second se	
			. 20
C. Enter new mailing address, if applicable:	» . /A	<u>() (</u>	
(Mailing address MAY BE A POST OFFICE BOX)	N/A		
	1	اراً الله المراجعة المراجعة المراجعة	
	<del></del>	<del>- Ol</del>	· · · · · ·
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		enter the name of the	
	NI/M		
Name of New Registered Agent:	N/A		
	(5)		
New Registered Office Address:	(Fio	rida street address)	
· ·		771 / 1	
<del></del>	(City)	, Florida (Zip Code)	
		, ,	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept t	the obligations of the position	on.
	N/A	ered Agent, if changing	
Sig	znati <b>l</b> re of New Registe	ered 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 X Remove X Add	<u>PT</u> <u>John I</u> <u>Y Mike :</u> <u>SY Sally :</u>	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	VP	Seanicka Pratt	(The "r" should not be there.)
Add	Roper Spelli Below Seathicka	Seanicka Pratt  ing change the "" "  to an """	De there.
2) Change	Seat Prom		
Add			
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
' / '	
	1
	*** ****

The date of each amendment(s) adoption:date this document was signed.	if other than the
Effective date if applicable:	
(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of vo was/were sufficient for approval.	tes cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	he amendment(s) was/were
Dated 3/11/2016	
Signature Signature	
(By the chairman or vice chairman of the board, president have not been selected, by an incorporator – if in the har other court appointed fiduciary by that fiduciary)	
Kimberly F (Typed or printed name of pe	ratt
(Typed or printed name of pe	rson signing)
PCEO	
(Title of person si	enine)