N19000 002 882

(Requestor's Name)	
(Address)	
(Address)	
(1111111)	
(C) \ (C) \ \ (C) \ \ (C) \ \ \ (C) \ \ \ (C) \ \ \ (C) \ \ (C	<u> </u>
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
(Coodinent (Gillion)	
Certified Copies Certificates of Statu	us
Special Instructions to Filing Officer:	
<u> </u>	

Office Use Only



200336716352

11/18/19--01023--001 **35.00

R. WHITE. DEC 1 6 2019 2015). 118 F.: 2:45

COVER LETTER

Division of Corporations	
NAME OF CORPORATION: Wells Ofeek West Homewares Assaliation	K
DVC DOCUMENT NUMBER: N1900002883	
The enclosed Articles of Amendment and fee are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Sovereigh 3 Jacobs Wolfery Mondeforment aufablica	rl)
Mil AIA Death Blid	
St. HuluStill, FL Bollo	
MeCel Houst and State and Zip Code) Necel Houst and State and Zip Code) E-mail address: (to be used for furthe annual report notification)	
For further information concerning this matter, please call:	
1)1000 Matter = 904.461.5550	
(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:	
S55 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)	
Mailing Address Street Address	

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

TO: Amendment Section

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

,	Articles of Amendment	
Wells Leek West (Name of Corporation as c (1900000)	rticles of Incorporation of MCD7 expensive filed with the	MONS ASSOCIATION TO
	Number of Corporation	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida No</i>	I For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "ea "Company" or "Co," may not be used in the name.	rporation' or "incorpor	ated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	ÿ	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		ida, enter the name of the
Name of New Registered Agent		
New Registered Office Address:		(l-lorida street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		cent the ablications of the position
тисту ассергие аррининен ав гезаястся адет. Т	an _i amuu sin aa a	серь на свящины ој те ромион.

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; \hat{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>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name 1	<u>Addres</u> s
1) Change	STD	Lancastel, Ellis	10475 Fortune Parking
Add Add Remove			JUK IND JOHNSONDILLE FZ 32250
2)Change	5/1	(1) enton Millel	10475 Forkere Parkway Suite 100
Remove			JOAN Smville, FL 32254
3) Change			
Add			
Remove			
4) Change			
Add			 i -
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sh	eets, if necessary).	cles, enter change (Be specific)				
	. ,					
			·		· · · · · · · · · · · · · · · · · · ·	
<u> </u>						
						-
					-	
			 ,	<u> </u>		 -
			.			
				- · · - · ·	<u>-</u>	
						<u>.</u>
· · · · · · · · · · · · · · · · · · ·						
						
			,			
	· · · · · · · · · · · · · · · · · · ·					
· · · · · · · · · · · · · · · · · · ·						
	·				···	
						

The date of each amendment(s) adop	otion:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will retinent of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	es entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 117.24	-19	
Signature		
	m or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or	
	pointed fiduciary by that fiduciary)	
(
	(Typed or printed name of person signing)	
	(Title of person signing)	