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DEC UA 2070 LALBRITTON

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	on: West on	LANGE DIEAM	Confu, INC.
DOCUMENT NUMBER:		•	
DOCUMENT NUMBER:	~ 10000	(/113_3	
The enclosed Articles of An	nendment and fee are sub	mitted for filing.	
Please return all correspond	ence concerning this matt	er to the following:	
Joel Ra	mos	(Name of Contact Perso	n)
west o	PRANGE DIPAN	(Firm/ Company)	
1136 E	Plant St.	(Address)	
winter	Gordon FI	34787 (City/ State and Zip Cod	le)
jRamos@	our Camila. C	hurc h d for future annual report	notification)
For further information cond			
Jomes	Warmy	at	201-217-3586 rea Code) (Daytime Telephone Number)
Enclosed is a check for the		•	
□ \$35 Filing Fee	\$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)
Mailing A	Address	Street	Address

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

•		
		<i>₹</i> 05.
	Articles of Amendment to	*O.
Ą	Articles of Incorporation	
·	of	
(112)		<i>'</i> .
West ORANGE Oream		
me of Corporation as currently filed with the Flo	orida Dept. of State)	
N19000009153	Number of Corporation (if know	
(Document	Number of Corporation (if know	vn)
rsuant to the provisions of section 617.1006, Florida endment(s) to its Articles of Incorporation:	Statutes, this Florida Not For P	Profit Corporation adopts the followin
If amending name, enter the new name of the co	rporation:	
NIA		The new
NIA ne must be distinguishable and contain the word "co	orporation" or "incorporated" o	or the abbreviation "Corp." or "Inc."
mpany" or "Co." may not be used in the name.		
Enter new principal office address, if applicable:	N/A	
incipal office address MUST BE A STREET ADD		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	x) NA	
If amending the registered agent and/or register new registered agent and/or the new registered of		ter the name of the
Name of New Registered Agent:	NIA	
_	(Floric	la street address)
New Registered Office Address:		•
	.14	
	PIA-	, Florida (Zip Code)
	(City)	(zip Code)
w Registered Agent's Signature, if changing Regi	stered Agent:	
ereby accept the appointment as registered agent.	am familiar with and accept the	obligations of the position.
- 1 11 6 30 30	. ,	•
	NA	
	NIA Signature of New Registere	d tout if aboveior
	signature of New Registere	a Agent, ij cnanging

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>V</u> <u>Mike</u> <u>SV</u> <u>Sally</u>	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Robert Dyer	1136 E. Plont St. Winter garden, 121 34787
Remove 2) Change Add	T	James Warmes	1136 E. Plant St. Winter garden, F. 3478.7
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add Remove			
		rticles, enter change(s) here: (Be specific)	

		
		
		
		
The date of each amendment(s) adopt date this document was signed.	otion:	_, if other than the
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not brument of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
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 members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated
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)
Joel Rames (Typed or printed name of person signing)
(Title of person signing)