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(Ro	equestor's Name)			
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2018 SEP 24 FM 12: 85

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: SANDRA WALTI	ERS CONSULTANTS, INC	<u>. </u>
DOCUMENT NU	P00000000847	<u> </u>	
The enclosed Articl	es of Amendment and fee are su	ibmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Sandra Walters		
		Name of Contact Persor	1
	Sandra Walters Consultants,	Inc.	
		Firm/ Company	
	6410 Fifth Street, Suite 3		
		Address	
	Key West, FL 33040		
		City/ State and Zip Code	:
san	dy@sweinc.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Sandy Walters		at (<u>305</u>	294-1238 de & Daytime Telephone Number
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	hailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

SANDRA WALTERS CONSULTANTS	S, INC.		
(<u>Name</u>	of Corporation as curre	itly filed with the Florida	Dept. of State)
P0000000847			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporati	on adopts the following amendment(s
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional co	corporated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
C. Enter new mailing address, if apple (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	<u>OFFICE BOX</u>) nd/or registered office ad		e name of the
			
		street address)	
New Registered Office Address:	N/A		, Florida
		(Ciṇ)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ations of the position.
	Signature of New	Registered Agent, if chang	ring

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	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>\$V</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>			<u>Addres</u> s	
I) Change	VP	Dokken	n, Curtis L, P.E.		1031 Ives Dairy Road	
Add					Miami, FL 33179	_
XXX Remove						
2) Change						
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
IVA
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

.	09/15/2018	
The date of each amendment(s) ad	loption;	, if other than the
date this document was signed.	00113110	
Effective date if applicable:	09/15/18	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmer fficient for approval.	ut(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	••	
	(voling group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	lder
action was not required.	pied by the incorporators without shareholder action and shareholder	
09/20/18 Dated		
	The Walle	
	irector, president or other officer - if directors or officers have not bee	<u> </u>
	1, by an incorporator – if in the hands of a receiver, trustee, or other co	urt
appoin	ed fiduciary by that fiduciary)	
	Sandra Walters	
	(Typed or printed name of person signing)	
	President, CEO	
	(Title of person signing)	