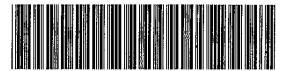
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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)
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(Document Number)	
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11/14/05--01043--019 **35.00

EFFECTIVE DATE 12/1/05 DIVISION OF CORPORATIONS
2005 NOV | 4 PM | 2: 17

Comend & N/c

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Good w	in I Smith, Inc.			
DOCUMENT NUMBER: PODODO = 3	33064			
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
GARY Good (Name of Con	ntact Person)			
Good win to	Smith, Inc.			
GOO BY JASS (Add	OK Suite 108 ress)			
C/Mauster, P/	33769 nd Zip Code)			
For further information concerning this matter, please call:				
(Name of Contact Person)	at (727) 726 - 6688 (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
\$35 Filing Fee \$Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (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 Goodwin & Smith. Inc

DIVISION OF D	LEU Y OF STATE
2005 NOV .	ORPORATIONS
2005 NOV 14	PM 12: 17

	WIN & DM		EFFECTIVE DATE
(Name of	corporation as current	tly filed with the Florida Dept. of State)	12/1/10
	9_		motoring habita
	000000	33064	
	(Document number	r of corporation (if known)	
Pursuant to the provisions of adopts the following amendm		Florida Statutes, this <i>Florida Prof</i> es of Incorporation:	it Corporation
NEW CORPORATE NAM	E (if changing):		
G. G.00	duin 1	Associates ING	
(Must contain the word "corporatio (A professional corporation must co	n," "company," or "incontain the word "charte	Associates Two corporated" or the abbreviation "Corp.," 'ered", "professional association," or the a	'Inc.," or "Co.") abbreviation "P.A.")
		N NAME CHANGE) Indicate A	rticle Number(s)
and/or Article Title(s) being a			
officer/	P. Kerton	Detor/	
, , ,	•	·	
Remove	-		
JoAnn	Smith	AS 0. UP	
600 B.	uns de.	AS 0, UP Suite 108 1 33764	<u></u>
Clean	enfac, F	1 33764	
	,		
	(Attach additio	onal pages if necessary)	
-	• ·	ification, or cancellation of issued and in the amendment itself: (if not a	· •

(continued)

The date of each amendment(s) adoption: 11 -10 - 05
The date of each amendment(s) adoption:
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing) Pacs. Land
(Title of person signing)

FILING FEE: \$35