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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORAT	10N:	. W.D. & Associates Inc.
DOCUMENT NUMBER	: <u> </u>	. W.D. & Associates, Inc.
The enclosed Articles of A	mendment and fee are su	abmitted for filing.
Please return all correspon	dence concerning this ma	atter to the following:
	O.	4.11.A D
		Name of Contact Person
		Firm/ Company
	5725	Lake Washington Rd
		Lake Weshington Rd Address
	Mulbour	City/ State and Zip Code
		City/ State and Zip Code
	E-mail address: (to be us	sed for future annual report notification)
For further information cor	ncerning this matter, pleas	sc cail:
Kevin	Downs	at (954) 234-8085 Area Code & Daytime Telephone Number
Name of Co	ontact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Department of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is cnclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ent Section of Corporations	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

. Articles of Ar	prporation 20/2 J/W -
to	
Articles of Inco	orporation Z0/2
of .	- JUH 20
K.W.D. J. ASSOCI	
(Name of Corporation as currently filed with the Fl	orida Dept. of State)
P01000060	862
(Document Number of Corporation (if	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	5725 Lake Washington Rd
,	Mulbourne, FL 32934
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5725 Lake Wishington Rd Mulbourne, FL 32934
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
5735 Lake Wa (Florida stree	eshington Rel
New Registered Office Address: Mubourn	, Florida <u>32934</u> (Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.

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; 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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Namc</u>	Address
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove		<u> </u>	
5) Change Add Remove			
6) Change Add Remove	<u></u>		

If amending or adding a (attach additional sheets;	if necessary).	(Be specific)				
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		····				
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If an amendment provid provisions for implement (if not applicable, in	nting the amen	ange, reclassif adment if not o	ication, or es	incellation o the amendm	f issued shar ent itself:	<u>es,</u>
						
				***************************************		-
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The date of each amendment(s) a	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	6/18/12
Signature	γ_{l}
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	ILevin Downs
	(Typed or printed name of person signing)
	President
	(Title of person signing)