## PO10000 64253

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15 MAY 18 AH 9: 24



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

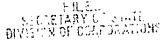
P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Wes John Corporation Inc.				
DOCUMENT NUMBER: P 01000064253				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person				
Thank of Contact Person				
Firm/Company 3789 Fowler of C				
Addrage				
TH. Myers Fl. 33901 City/ State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
dames Buday at (239) 633-6494				
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:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section Division of Corporations Division of Corporations				

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to



Articles of Incorporation 15 MAY 18 AM 9: 24 (Name of Corporation as currently filed with the Florida Dept. of State) 01000064253 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

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:	ove, and sally sill	in, or us un mu.	
X Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>?</u>	Mike Brigandi	3789 fowler St.
X Add		(	Sitea C
Remove			Ft. Myers Fl. 3390,
2) X Change	D	Debra Brigandi	3041 SW 23 - 1
Add		ľ	Ave Cope Coval.
Remove	\ /	cl 0 /	Fl 33514.
3) Change	<u> </u>	Cames Buday	5222 SW 23 C
X Add		/	ave Cape Coral.
Remove			M 33914
4) Change	<u>5V</u>	Brian D'Donnell	3789 towlerst C
X Add		·	Ft myers F/ 33901
Remove			
5) Change			
Add			<u></u>
Remove			
6) Change			<del></del>
Add			
Remove			

	ing additional Articeets, if necessary).	(Be specific)	<u></u>		
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f an amendment p	royides for an exch	iange, reclassifica	tion, or cancellat	ion of issued shares	ia.
provisions for imp	lementing the ame	ndment if not cor	<u>itained in the ame</u>	ndment itself:	
(if not applicat	ble, indicate N/A)				
-					
-				44	

•	·
The date of each amendment(s) adoption:	Fil., if other than the
date this document was signed.	BIVIST WOF CORPURATIONS
Effective date if applicable: (no	more than 90 days after amendment file date) 15 MAY 18 AM 9: 24
Note: If the date inserted in this block does not me document's effective date on the Department of State	eet the applicable statutory filing requirements, this date will not be listed as the 's records.
Adoption of Amendment(s) (CHECK	(ONE)
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	cholders. The number of votes cast for the amendment(s) val.
	reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes cast for the amendme	nt(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
by(voting g	roup)
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incoraction was not required.	porators without shareholder action and shareholder
Dated	5
Signature	
	or other officer – if directors or officers have not been ator – if in the hands of a receiver, trustee, or other court hat fiduciary)
Mike	Bricond ( ed or printed name of person signing)
(Турс	ed or printed name of person signing)
<u> </u>	resident.
(	(Title of person signing)

the