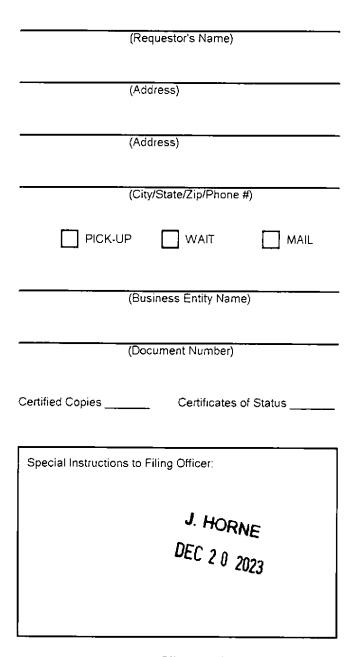
## P0200005731



Office Use Only



700419803207

12/04/45-- 0044--004 (\*\* 65.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: CAM Wealth Adv	isors				
DOCUMENT NUM						
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Ron Christopher					
	Name of Contact Person					
	CAM Wealth Advisors					
	Firm/ Company					
	1180 SPrings Centre Blvd South #202					
	Address					
	ALtamonte SPrings, FL 32714					
	City/ State and Zip Code					
	ron@gewmadvisors.com					
	<b>-</b> -	sed for future annual report	notification)			
For further information	n concerning this matter, pleas		. 947-7396			
Name of Contact Person		at (_407	)			
	or the following amount made					
■ \$35 Filing Fee	☐S43.75 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address 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

CAM Wealth Advisors	
(Name of Corporation as currently filed with the Florida Dept. of State)	```
p02000005731	}-
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folloits Articles of Incorporation:	्रि wing amendment(s) t
A. If amending name, enter the new name of the corporation:	.*
Covenant Wealth Advisors INC	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevi "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con "chartered," "professional association," or the abbreviation "P.A."	ation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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,	
(City)	Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position of the posi	on.
Signature of New Registered Agent, if changing	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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 Doe		
X Remove	V	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove Change			· <u></u>	
Add				
Remove				
4) Change				
Add				
Remove				
51 Change		<del>.</del>		
Add				
Remove				
6) Change			<del></del>	
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
f	
orovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indifferent not contained in the amendment itsen.

•

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amssufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	_ pri	
	(voting group)	
Dated11 Signature	128/23 Ll A D	
(By)a <del>se</del> lec	director, president or other officer – if directors or officers have i ed, by an incorporator – if in the hands of a receiver, trustee, or o nted fiduciary by that fiduciary)	not been ther court
	Ronald A Christopher	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>

A ..........

. . . .