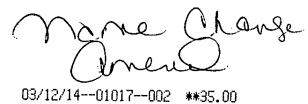
## P02000015646

(Requ	iestor's Name)	
(Addre	ess)	
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(City/s	State/Zip/Phon	e #)
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(Docu	ıment Number)	)
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## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

	RATION: WLC CON		PORATION		
DOCUMENT NUME	BER: P0200001564	6			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	WILDER MOREN	10			
	Name of Contact Person				
	WLCCONSULTIN	NG CORP			
		Firm/ Company			
	15646 SW 40 ST	9.			
	Address				
	MIRAMAR FL 33				
		City/ State and Zip Code	e		
WIL	MORA2004@YA	HOO.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
WILDER MO	RENO	at (786	, 7121221		
Name o	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 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)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, F1, 32301		

## **Articles of Amendment** to Articles of Incorporation

FILED

W.L.C. CONSULTING, CORP.

2014 MAR 12 PM 1:22

(Name of Corporation as currently filed with the Florida Dept. of State) P02000015646

nt(s) to

(Document Number of Corp	poration (if l	(nown)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this F	<i>lorida Profit Corporation</i> ad	opts the following amendme
A. If amending name, enter the new name of the corpor	ration:		
WILDER MORENO P.A.			The new
name must be distinguishable and contain the word "c" "Corp.," "Inc.," or Co.," or the designation "Corp," "word "chartered," "professional association," or the abb	Inc," or "C	o". A professional corpora	rated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		15646 SW 40 S	TREET
		MIRAMAR, FL 33027	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15646 SW 40 STREET	
		MIRAMAR, FL 33027	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ss in Florida, enter the nam	ne of the
Name of New Registered Agent	V/A		
rume of frew registered figure	iln.		
	<mark>J   FT</mark> (Florida stree	t address)	
New Registered Office Address:	JIA	, Florida_	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		th and accept the obligations	s of the position.
No. 2007 to 20	I/A		of the position
Signature of New R	egistered Ag	ent, 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 <math>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 D	loe		
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>		
X Add	SV Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>	Name	1	Address
1) Change	NA		MA	
Add				<del></del>
Remove			A	- <u>-</u> -
2) Change	NA		N/x	
Add				
Remove 3) Change	WA		NA	<u> </u>
Add				
Remove				
4) Change	NA		NIA	
Add	'			
Remove	1		NIA	<del></del>
5) Change	WA			
Add				
Remove			, <i>i</i> .	
6) Change	N/A		N/N-	
Add				
Remove				

. If amending or adding additional Arti (Attach additional sheets, if necessary).	
REAL ESTATE SERVICES.	
. If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)  \[ \lambda/\lambda \]	endment if not contained in the amendment itself:
<del></del>	
The state of the s	

The date of each amendmen	t(s) adoption: JANUARY 1, 2014	, if other than the
date this document was signed		
Effective date if applicable:	JANUARY 1, 2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated MA	RCH 4, 2014	
Signature_	wille	
	By a director, president or other officer - if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
a	ppointed fiduciary by that fiduciary)	
	WILDER MORENO	
	(Typed or printed name of person signing)	· <del>····</del>
	PRESIDENT	
	(Title of person signing)	- <del></del>