| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section · Division of Corporations

| NAME OF COR | PORATION: | BRANJEN, INC. | | |
|--|--|---|---|--|
| DOCUMENT NU | JMBER: | P02000083155 | | |
| The enclosed Artic | cles of Amendment and fee a | re submitted for filing. | | |
| Please return all co | orrespondence concerning this | s matter to the following: | | |
| | W. Jus | STIN COTTRELL, ESQ | | |
| | Na | ame of Contact Person | : | |
| W. JUSTIN COTTRELL, P.A. | | | | |
| | | Firm/ Company | , | |
| | 809 WALKERBILT ROAD, SUITE 6 | | | |
| | Address | | | |
| | NAPL | ES, FLORIDA 34110 | | |
| | City/ State and Zip Code | | | |
| | justin(E-mail address: (to be used | @wjc-law.com For future annual report notification) | | |
| For further information concerning this matter, please call: | | | | |
| the state of the s | ndrea M. Mayes | | 9-4888 | |
| Name of Contact Person Area Code & Daytime Telephone Number | | | ephone Number | |
| Enclosed is a check | k for the following amount ma | ade payable to the Florida Depart. | ment of State: | |
| | ☐ \$43.75 Filing Fee & Certificate of Status | S43.75 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 Tallahassee, FL 32314 | | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle | | |

Tallahassee, FL 32301

| Articles of Articles of Articles of Inc. Of | orporation ZOO9 AUG |
|--|--|
| BRANJEN, INC. | the Florida Dept. of State) ALLAHASSEE, FLORIDA ion (if known) |
| (Name of Corporation as currently filed with | the Florida Dept. of State) ALAHASS TOF |
| P02000083155 | E. FLORIDA |
| (Document Number of Corporat | ion (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation: | es, this Florida Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporation | <u>n:</u> |
| M & D OF SOUTHWEST FLO | PRIDA, INC. The new |
| name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Contain the word "chartered," "professional associations | oration," "company," or "incorporated" or the orp," "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 13020 LAKE MEADOW DRIVE FORT MYERS, FLORIDA 33913 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 42000 LAKE MEADOM DDIVE |
| (Mauing address MAT BE A POST OFFICE BOX) | 13020 LAKE MEADOW DRIVE |
| | FORT MYERS, FLORIDA 33913 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add | |
| Name of New Registered Agent: W. JUSTIN C | OTTRELL, ESQ |
| | RBILT ROAD, SUITE 6 da street address) |
| NAPLES | , Florida_34110 |
| (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered A | |
| hereby accept the appointment as registered agent. I am famil | iar with 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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---|---|----------------------|
| <u> </u> | MICHAEL P. LEWIS | 3120 WINKLER AVENUE EXT SUITE 12 FORT MYERS, FLORIDA 33916 | ☑ Remove |
| <u>P</u> | PATRICK JOYCE | 13020 LAKE MEADOW DRIVE FORT MYERS, FLORIDA 33913 | |
| <u>VP</u> | JUDY JOYCE | 13020 LAKE MEADOW DRIVE FORT MYERS, FLORIDA 33913 | |
| | ling or adding additional Articles, enterestional sheets, if necessary). (Be spe | | |
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| | | | |
| provisio | nendment provides for an exchange, rems for implementing the amendment in applicable, indicate N/A) | eclassification, or cancellation of issu f not contained in the amendment it | ied shares, self: |
| | | | |
| | | | |
| | , | | |
| | ···· | | |
| | | | · |

| The date of each amendmen | t(s) adoption: AUGUȘT 3, 2009 |
|---|---|
| Effective date if applicable: | AUGUST 3, 2009 (date of adoption is required) |
| • • • | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/we by the shareholders was/w | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement 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/we action was not required. | 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 Of | (D.RES) |
| sele | a director, president of other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
| | PATRICK JOYCE |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |