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COVER LETTER

TO: Amendment Secti Division of Corpe		Λ			,
DIVISION OF COURT	RATION: Webb	or Apprisal	£	Consulting	Inc
NAME OF CORPOR	RATION: WEYN				
DOCUMENT NUMB	BER: <u>404</u>	0000 68126			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Barre	tt 4- Web	bor		
	Webb	Name of Contact Perso Print Company	on 6	onsulting Ine	শ <u>-</u>
	1055 S. Ta	Firm Company Miani Trail,	Svi	te 203	
	Sarasota,	Address 34	134	900 16 343	236
		City/ State and Zip Cod		ncast. re	
	E-mail address: (to be us	sed for future annual report	t notificat	ion)	
For further information	s concerning this matter, pleas	se cull:			
Barrett	4. Webber	at (941)	232-41	57
Name o	of Contact Person	Area Co	ode & Da	ytime Telephone Nu	mber
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment o	of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Ceri Ceri (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy enclosed)	
	ling Address indment Section		Address dinent Se		

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Articles of Am	endment from the second
to Articles of Inco	rnoration
Webber Appraisal &	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P 04 0000 69	\$126
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this Faits Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co" or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1055 S. Tamiami Mail Svite 203
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Serasota, PC 34236 1 same as above 1055 S. Tamiami Trail, Svite 203 Sarasota, FC 34236
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent Ballett	webler
	miemi Trail, Svite 203
New Registered Office Address: Sarasota	r address) Florida 34236 (Lip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	

Page 1 of 4

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	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	DTS Aurella F. Webber	2664 Mertin St. Sarasota, Fr 34237
Add		Sarasota, Fr 34237
X Remove		
2) Change	TS Phylles W. Murphy	1106 Whitegate Ct. Sarasota, FC 34232
_ X _ Add		Saraso79, PC 34232
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		~ ~~
Add		
Remove		
6) Change		
Add		
Remove		

(Attach additional s		rticles, enter chan). (Be specific)	ge(s) nere:		
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	•				
					<u> </u>
		change, reclassific nendment if not co			
(if not applica	ble, indicate N/A)		, , , , , , , , , , , , , , , , , , ,	amenaniem reșen	<u>•</u>
50	Sharas	- to be	transl	2160	from K- Webber
	7114165	<u>100 96 </u>	TUMIC	errea	+1011
Hvcel	ia F.	Webbe/	to	Barrett	K. Webber
			<u> </u>	<u> </u>	<u> </u>
					1 1 1 2
			······································		

The state of the s	November	2,	20/8	, if other than the
The date of each amendment(s) adoption:date this document was signed.				, it office that the
Effective date if applicable:	November November	2,	2018	
(n	o more than 90 days afte.			
Note: If the date inserted in this block does not n document's effective date on the Department of State		ory filing	requirements, this	date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)			
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr		votes cas	t for the amendmen	ot(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting gro				ement
"The number of votes cast for the amendment	ent(s) was/were sufficient	for appro	val	
by(voting				
(voting	group)			
☐ The amendment(s) was/were adopted by the boar action was not required.	rd of directors without sha	areholder :	action and shareho	lder
The amendment(s) was/were adopted by the inco- action was not required.		older actio	n and shareholder	
November	2, 2018			
Dated No vember Signature	· y stap			
(By a director, presiden	t or other officer – if dire			
selected, by an incorpo appointed fiduciary by	rator – if in the hands of a that fiduciary)	receiver.	trustee, or other co	ourt
.,,	Barrett L.	Web	ber	
(Тур	ed or printed name of per	son signir	ng)	
$_\{\mathcal{D}}$	Treator, Pr	esida	+	
	(Title of person si	gning)		