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R. WHITE EVET 203 2018 NOV 19 PH 12: 52 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HILL SPOON	ER & ELLIOTT INC.
DOCUMENT NUMBER: P04000135035	
The enclosed Articles of Amendment and fee an	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Hettie Spooner	
	Name of Contact Person
Hill Spooner & Effiott, h	ne.
	Firm/ Company
2001 Thomasville Road	
	Address
Tallahassee, Florida 3230	80
	City/ State and Zip Code
hettie@hillspooner.com	
·	be used for future annual report notification)
For further information concerning this matter, p	please call:
Hettie Spooner	at (850) 509-4337 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
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

FILED

2018 NOV 19 PM 12: 52 Articles of Amendment to Articles of Incorporation

Hill Spooner & Elliott, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P04000135035 (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: 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) _. Florida (City) 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.

of

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)

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Carla Dee Stephens	405 Rich Bay Road
X Add			Havana, Florida 32333
Remove			
2) Change			
Add			-
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

NIA	
	
<u> </u>	
<u> </u>	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NIA	
	-
	
	

The date of each amendment(s)	adoption: NA	if other than the
date this document was signed.	· · · · · · · · · · · · · · · · · · ·	
Effective date if applicable:	NIA	
глесиче цасе <u>п арунсате</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements.	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	lment(s)
	oproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment().	
"The number of votes car	at for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
☐ The amendment(s) was/were a action was not required.	lopted by the board of directors without shareholder action and sha	reholder
■ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareho	lder
Novembe Dated	r 13, 2018	
Signature γ	lottie (2 50mm -	
(By a select	director, president or other officer – if directors or officers have no ed, by an incorporator – if in the hands of a receiver, trustee, or oth nted fiduciary by that fiduciary)	
	Hettie R. Spooner	
	(Typed or printed name of person signing)	•
	President/Director	
	(Title of person signing)	