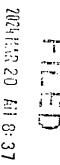
P04872

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COVER LETTER

TO: Amendment Section
Division of Corporations

. . . .

NAME OF CORPORATION	ON: PAUL WE	ELCH			
DOCUMENT NUMBER:	P04872				
The enclosed Articles of Am			/		
Please return all corresponde	ence concerning this mat	iter to the following	;: 🗸		
	PAIL W	EICH REA	415TFP	ED AGENT	
	PAUL WELCH, REGISTERED AGENT Name of Contact Person				
	PAUL WELCH INC.				
	198	A SW BILT	14000	STREET SHITE 114	
	1984 SW BILTMORE STREET, SUITE 114 Address				
	· p	ORT SAINT	Lucie	FL 34984	
-	·	City/ State and Z	ip Code	FL 34984	
	hen em		Cond		
	E-mail address: (to be us	ed for future annual	report n	otification)	
	a 255. (10 55 25			•	
For further information cond	erning this matter, pleas	se call:			
PAUL W	ELCH	at (772	370-5092 & Daytime Telephone Number	
Name of Cor	ntact Person	A	Area Code	& Daytime Telephone Number	
Enclosed is a check for the f	following amount made	payable to the Florid	da Depart	ment of State:	
S35 Filing Fee	№ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing F Certified Copy (Additional copy enclosed)	,	S\$2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Division of P.O. Box	ent Section of Corporations		Division The Cer 2415 N.	ddress ent Section of Corporations are of Tallahassee Monroe Street, Suite 810 see, FL 32303	

Articles of Amendment to Articles of Incorporation of

FILED

2024 KAR 20 AH 8: 38 PAUL WELCHING (Name of Corporation as currently filed with the Florida Dept. of State) P04872 (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: N/A A. If amending name, enter the new name of the corporation: A/N 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." N/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) New Registered Office Address: 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. N1/4
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 [Doc		
X Remove	<u>V</u> <u>Mike .</u>	iones		
<u>X</u> Add	<u>ŞV</u> <u>Sally S</u>	Smith		
Type of Action (Check One)	Title	Name	Address	
1) N/AChange	<u>D</u>	PAMELA PITTS-WELCH	370 SW TWIG AVE	
X Add			PORT SAINT LUCIE	
N/A Remove			FLORIDA 34983	
2) N/A Change		KEVIN SHAFER	117 SW TWIG AVE.	
X_ Add			PORT SAINT LUCIE	
<u>H/A</u> Remove 3) <u>N/A</u> Change	N/A	N/A	FLORIDA 34983	
N/AAdd		,		
N/A Remove				
4) <u>U/A</u> Change	<u>D</u>	PAUL WELCH, JR	991 SW SULTAN DRIVE	
X Add			PORT SAINT LUCIE	
N/A Remove			FLORIDA 34983	
5) N/4 Change	NI	<u> H/A</u>	<u> </u>	
Add				
Remove				
6) Na Change	W/F	N/A-	N/A	
Add				
Remove				

•	ry). (Be specific)				
N/A					
				 .	
					
					
····					·
					<u> </u>
					
				<u>-</u>	
an amendment provides for an rovisions for implementing the (if not applicable, indicate Ni	amendment if not e	cation, or cancell: ontained in the a	ation of issued st mendment itself:	aares,	
N/A					
				· 	
		<u> </u>	·		
	<u></u>				
			·		

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The date of each amendment(s) adoption: _		kl/A	, if other than the				
	date this document was signed.						
	Effective date if applicable:	N/A					
		N/A (no more than 90 days after amendment file date)					
	Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, the of State's records.	is date will not be listed as the				
	Adoption of Amendment(s) N/A (C	HECK ONE)					
H/¥	The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareholder	action and shareholder				
N/A	The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.						
MA	☐ The amendment(s) was/were approved by t must be separately provided for each votin	he shareholders through voting groups. The following sta g group entitled to vote separately on the amendment(s):	itement				
	"The number of votes cast for the ame	endment(s) was/were sufficient for approval					
	by \\/A	."					
	(re	ting group)					
	Dated N/A						
	(By a director, pre	sident or other officer – if directors or officers have not b	een				
	selected, by an inc	corporator - if in the hands of a receiver, trustee, or other	court				
	appointed fiducia	y by that fiduciary)					
	И	/A					
		/A (Typed or printed name of person signing)					
	Н	(*					
		(Title of person signing)					

Informational Notice: Reporting of Beneficial Ownership Information

Beginning January 1, 2024, certain types of corporations. limited liability companies, and other similar entities created in or registered to do business in the United States must report information about their beneficial owners—the persons who ultimately own or control the company—to the Department of the Treasury's Financial Crimes Enforcement Network (FinCEN). A reporting company created or registered to do business before January 1, 2024, will have until January 1, 2025, to file its initial beneficial ownership information report.

Additional information about the reporting requirements, including answers to questions such as "is my company required to report beneficial ownership information to FinCEN," "who is a beneficial owner," and "when do I need to report my company's beneficial ownership information" is available on FinCEN's beneficial ownership information webpage. https://FinCEN.gov/BOL

DIVISION OF CORPORATIONS



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Detail by Entity Name

Foreign Profit Corporation

PAUL WELCH, INC.

Filing Information

Document Number

P04872

FEI/EIN Number

22-2450159

Date Filed

02/04/1985

State

DE

Status

ACTIVE

Last Event

REINSTATEMENT

Event Date Filed

03/26/2012

Principal Address

1984 S.W. BILTMORE ST.

SUITE 114

PORT ST. LUCIE, FL 34984

Changed: 01/29/1997

Mailing Address

1984 S.W. BILTMORE ST.

SUITE 114

PORT ST. LUCIE, FL 34984

Changed: 01/29/1997

Registered Agent Name & Address

WELCH, PAUL

1984 S.W. BILTMORE ST.

SUITE 114

PORT ST. LUCIE, FL 34984

Address Changed: 03/26/2012

Officer/Director Detail

Name & Address

Title PVPT

WELCH, PAUL

1984 S.W. BILTMORE ST.

PORT ST. LUCIE, FL 34984