P05000005060

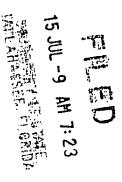
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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: ____ Summit Wealth Partners, Inc. P05000005060 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mitchell Levin Name of Contact Person Summit Wealth Partners, Inc. Firm/ Company 800 N Magnolia Ave. #105 Address Orlando, FL 32803 City/ State and Zip Code MLevin@MySummitWealth.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mitchell Levin Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status **Certified Copy** Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 **Clifton Building**

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

	_ -	3-4		
Summit Wealth Partners, Inc.		71 (4	3	3
(Name of Corpo	pration as currently filed with the Florida Dept. of State)	73 ŏ2	اب.	-
P05000005060		93	3	
(D	ocument Number of Corporation (if known)	371		
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the fol	lowing an	endme	nt(s)
A. If amending name, enter the new name of the	ne corporation:			
		The	e new	,
	word "corporation," "company," or "incorporated" or Corp," "Inc," or "Co". A professional corporation name the abbreviation "P.A."			
3. Enter new principal office address, if applic	able:			
Principal office address <u>MUST BE A STREET</u>	ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	FROY)			
mil DB H TOOL OF THE				
	istered office address in Florida, enter the name of the			
new registered agent and/or the new registe	Pred office address:			
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:		17:- C-3-		
	(City)	(ZIP Coae	,	
New Registered Office Address:	(City), Florida	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:			
hereby accept the appointment as registered age	nt. I am familiar with and accept the obligations of the posi	tion.		
				
/	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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>s</u>	Chad Warrick	800 N Magnolia Ave, #105
X Add			Orlando, FL 32803
Remove			
2) Change	T	Jason Print	800 N Magnolia Ave, #105
XAdd			Orlando, FL 32803
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

	lding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)	
		
		<u> </u>
provisions for in	provides for an exchange, reclassification, or cancellation of issued shares, uplementing the amendment if not contained in the amendment itself:	
provisions for in	provides for an exchange, reclassification, or cancellation of issued shares, uplementing the amendment if not contained in the amendment itself: able, indicate N/A)	
provisions for in	plementing the amendment if not contained in the amendment itself:	
provisions for in	plementing the amendment if not contained in the amendment itself:	
provisions for in	plementing the amendment if not contained in the amendment itself:	
provisions for in	plementing the amendment if not contained in the amendment itself:	
provisions for in	plementing the amendment if not contained in the amendment itself:	

	July 1, 2015	
The date of each amendment(s) date this document was signed.	adoption:	_, if other than the
Effective date if applicable:	ly 1, 2015	
Enective date <u>it appikable</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, this date will bepartment of State's records.	not be listed as the
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 amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
July 1, 20	015	
Dated		
- 1 .		
Signature	director, president or other-officer - if directors or officers have not been	_
	ied, by an incorporator – if in the hands of a receiver, trustee, or other court	
/ appoi	inted fiduciary by that fiduciary)	
	Mitchell Levin	
	(Typed or printed name of person signing)	
	CEO /	
	(Title of person signing)	
	(