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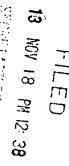
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Culberson Actor Document Number: P05000030861	·					
The enclosed Articles of Amendment and fee are submitted	for filing.					
Please return all correspondence concerning this matter to the	e following:					
Jennife	er Culberson					
	e of Contact Person					
Hammond-English	Accounting Services, Inc.					
	Firm/ Company					
1315 Center St						
	Address					
Leesburg, FL 34	1 748					
	State and Zip Code					
culbersonaccounting@	ncomeast net					
E-mail address: (to be used for f						
E-man address. (to be used for f	iture aimuai report nourication)					
For further information concerning this matter, please call:						
Jennifer Culberson 352 728-3006						
Name of Contact Person	at (352) 728-3006 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:						
Certificate of Status Certificate Of Status (Ad	1.75 Filing Fee & S52.50 Filing Fee tified Copy ditional copy is closed)					
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 Amendment Articles of Incorporation of

Culberson Accounting Services, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

P050000	030861			
(Document Number of Corpo	oration (if kn	own)		
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tutes, this <i>Flo</i>	rida Profit Corporation ad	opts the following	; amendment(s
A. If amending name, enter the new name of the corpora	ation:			
Hammond-English Ac	ccounting	Services, Inc.		The new
name must be distinguishable and contain the word "cc "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	nc," or "Co"	'. A professional corpora	rated" or the ab tion name must c	breviation ontain the
B. Enter new principal office address, if applicable:	_		- 100	ಪ
(Principal office address <u>MUST BE A STREET ADDRES.</u>	<u>sz</u>)			~
	-			
	-		3 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-8
C. Enter new mailing address, if applicable:			الم- الم- الم	⊋ Ö
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	-			<i>₽</i>
	-		# 2721 (ယ ထ
		 _		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		in Florida, enter the nan	ne of the	
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	,
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		and accept the obligation	s of the position.	
Signature of New Re	egistered Age	nt, 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 <math>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:		, 5,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove	,		
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add Add			
Remove			

tuach ada	i <mark>ng or adding add</mark> Iditional sheets, if	necessary). (E	e specific)			
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`an ame	ndment provides	s for an exchang	ze, reclassifica	tion, or cancells	ntion of issued	shares
rovisio	ns for implement	ing the amendn	nent if not con	tained in the an	nendment itsel	<u>1</u>
(if ne	ot applicable, indi	icate N/A)				
						•
			•		<u> </u>	
	-					

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	11/11/2013	
Signature	Jude Callee	
, , ,	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	Jennifer Culberson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	