Division of Corporations Page Lof 1

> Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

> > (((H15000067400 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LECPOLD KORN & LEOPOLD, F.A.

Account Number : I20010000025 : (786)899-2235 : (786)899-2318 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN

MIS 595, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPORATION: MIS 595, Inc.					
OCUMENT NUMBER: P05000153156					
he enclosed Articles of Amendment and fee are submitted for filing.					
lease return all correspondence concerning this matter to the following:					
Melissa Sosa, RE Paralegal					
Name of Contact Person					
Leopold Korn, P.A.					
Firm/ Company					
20801 Biscayne Blvd., Suite 501					
Address					
Aventura, FL 33180					
City/ State and Zip Code					
msosa@leopoldkorn.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Melissa Sosa					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

HI50000 674003

Articles of Amendment to Articles of Incorporation of

MIS 595, Inc.					
(Name of Corporation as currently	y filed with the Fi	orida Dept. of St	ate)		
P05000153156					
(Document Number	of Corporation (if	known)			
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this F	Torida Profit Col	rporation adoj	pts the following	amendment(s) to
A. If amending name, enter the new name of the	corporation:				
WDPC, Inc.					The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "C	o". A professio	or "incorpora nal corporation	ited" or the abl on name must co	previation ontain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)				SECRETAL DIVISION OF
D. If amending the registered agent and/or registered new registered agent and/or the new register			ter the name	of the	CORFORATION OF THE CORFORDING THE CORFORD THE CORFORDING THE CORFORD THE CORFORDING THE CORFORD THE CORFORDING THE CORFORD THE CORFORDING THE CORFORD
Name of New Registered Agent					5
,	(Florida stree	et address)			
New Registered Office Address:			Florida		
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	Registered Agent:	ith and accent the	abligations	d tha nosition	
польну авсори оне аруканивени из гезимелей изет	i. i um jumitiur Wi	ин ини иссері іне	ovuganons o	у ык рохиоп.	
Signature of	New Registered Ag	zent, if changing			
C.	G 1,6	,			

H150000674003

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 Do	o <u>c</u>	
X Remove	¥	Mike Jo	nics	
X Add	SY	Sally St	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add Remove				
2) Change				
Add				
3) Change		······································		
Add				
4) Change				
Add Remove				
5) Change				
Add				
Remove				487
6) Change		<u> </u>		
Remove				

H150000674003

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	•
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
······································	

H50000074003

The date of each amendment(s) adoption:	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 adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and slureholder action was not required.	
Dated 3/12/15	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other coun appointed fiduciary by that fiduciary)	-
POSERT VECHTEL (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PLESIDENT	
(Title of person signing)	===