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(Requestor's Name) (Address)			
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: TOURVILLE, SPENCER & ASSOCIATES, INC. DOCUMENT NUMBER: PO 60000 27 417 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pencer E Associates,
Firm/Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 577 - 7596

Area Code & Daytime Telephone Number 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 enclosed) (Additional Copy is enclosed)

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 to Articles of Incorporation of

to

	Associates, Inc.
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P060000 274	17
	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>u</u>
Ala	The new
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	15436 blu Ct N. Loxahatchez Florida 33470
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	15436 664 Ct N. Loxahatchee, Florida 33470
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add	
Name of New Registered Agent Name of New Registered Agent	ress:
Name of New Registered Agent (Florid	la street address)
Name of New Registered Agent Name of New Registered Agent	ress:

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	<u>PT</u> John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	<u>/ Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Director	Richard R. Lourville	Lake Worth, FE. 33467
Add			Lake Worth, FE. 33467
Kemove			
2) Khange	<u> </u>	Kelly A. Spencer	15436 66th Q-N. Loxahateher, FZ. 3≥470
Add		(ADDRESS CHANCE)	Loxabatcher, Fr. 33470
Remove			
3) Change	<u> </u>	Kelly A. Spencer CTITLE CHANGE)	15436 bloth a M.
X_ Add		CTITLE CHANGE)	Lotalatchee, Fr. 33470
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			_
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
and the second s	
	. ,
	nange, reclassification, or cancellation of issued shares, and and an analysis of the angle of the shares of the s
(if not applicable, indicate N/A)	
FE Attached lett	ter where 12 chard R. Tourville
As to Kelly A.	Speacer his (750) shares of
OURVIlle, Spencer	Speccer his (750) shares of
· '	`
- 1,8 -	

January 2, 2017

I Richard R Tourville, Director, Tourville, Spencer & Associates, Inc. effective January 1, 2017 gift my seven hundred and fifty (750) shares of Tourville, Spencer & Associates, Inc. stock, Florida State Corporate number Po6000027417, EIN 51-0573227 PAR value \$7891.00 to Kelly A. Spencer, Director, Tourville, Spencer & Associates, Inc.

Richard R. Tourville, Director

Tourville, Spencer & Associates, Inc.

The date of each amendment(s) adoption:date this document was signed.	03/98/901	, if other than the
1	1	
Effective date if applicable:	(no more than 90 days after amendment file d	uta)
	(no more than 30 days after amenament fite a	uie)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirem f State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	•
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the approval.	amendment(s)
	ne shareholders through voting groups. The follo g group entitled to vote separately on the amenda	
	ndment(s) was/were sufficient for approval	
by	ting group)	
(no	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	areholder
Dated 03 28 2	le Agren	
selected, by an inc	sident or other affect – if directors or officers hat orporator – if in the hands of a receiver, trustee, or by that fiduciary)	
_ Ke	(Typed or printed name of person signing)	
~	Director	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·