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$\not$	FILING	P.A. Amendment	
•	Thomas	O. Wells, P.A.	
	(CORPORATE NA	AME AND DOCUMENT #)	
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SPECIAL INSTRUCTIONS:

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

	Thomas O	Walls D A		
NAME OF CORPORATIO	P080000052			
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing.		
Please return all corresponder	ice concerning this ma	tter to the following:		
Tho	mas O. Wells	<b>;</b>		
		Name of Contact Person	1	
Wel	ls & Wells, P.	A.		
		Firm/ Company		
540	Biltmore Way	/		
		Address		
Cor	al Gables, Flo	orida 33134		
<del></del>	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e	
mechel	e@twellslaw.	com		
	_	ed for future annual report	notification)	
	•	•	•	
For further information conce	ming this matter, pleas	se call:		
Thomas O. Wells		at (305	, 444-0016	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	urtment of State:	
_	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		-	Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		
		~ *********	, - <del></del> -	

## Articles of Amendment to Articles of Incorporation of

FILED

Thomas O. Wells, P.A.

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SECRETISATION STATE (Name of Corporation as currently filed with the Florida Dept. of State) . JALLAHASSEE, FLORIDA P08000005239 (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: A. If amending name, enter the new name of the corporation: Wells & Wells, P.A. 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." 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: , Florida (Citv) (Zip Code) 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.

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SVD	Diane Noller Wells, Esq.	540 Biltmore Way
Add			Coral Gables, FL 33134
Remove			
2) Change	PTD	Thomas O. Wells, Esq.	540 Biltmore Way
Add			Coral Gables, FL 33134
Remove			·
3) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) ac	loption:		$_{}$ 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 add by the shareholders was/were su	pted by the shareholders. The number of fficient for approval.	votes cast for the amendment(s)	
	roved by the shareholders through voting each voting group entitled to vote separa		
"The number of votes cast	for the amendment(s) was/were sufficient	for approval	
by		n	
	(voting group)		
The amendment(s) was/were add action was not required.	pted by the board of directors without sha	reholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareho	lder action and shareholder	
Dated Novemb	er 3, 2014		
Signature	1/m D 4//5	~	
	rector, president or other officer if directly an incorporator - if in the hands of a		
	ed fiduciary by that fiduciary)		
	Thomas O. Wells, Esq.		_
	(Typed or printed name	of person signing)	
	President		
	(Title of persor	signing)	