## PD8000019219

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TALLAHASSEE FINATE

Amend

MAR 22 2017 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: W L COBB SERV	/ICES,INC.	
	MBER:		
The enclosed Artica	les of Amendment and fee are su	ubmitted for filing.	
Please return all co	respondence concerning this ma	atter to the following:	
	WILBERT COBB		
		Name of Contact Person	n
	W L COBB SERVICES INC		
	<del></del>	Firm/ Company	
	1591 ROSEMONT DR	Tillin Company	
		Address	
	CLEARWATER, FL 33755		
		City/ State and Zip Cod	e
For further informa	E-mail address: (to be u	Photmail. Co sed for future annual report se call:	notification)
WILBERT / L	aura	at (	415-4171
	ne of Contact Person  for the following amount made	Area Co 727-	de & Daytime Telephone Number
■ \$35 Filing Fee	□\$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)
A D P	Iailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

W L COBB SERVICES, INC.	
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P08000019219	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
P. Enter way principal office address if applicables	N/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)	N/A ARE A
	ASSE ASSE
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	ddress in Florida, enter the name of the
•	<u>ESS:</u>
Name of New Registered Agent N/A	
(Florida	street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	
I hereby accept the appointment as registered agent. I am familia	ir with and accept the obligations of the position.
Signatura of Nan	w 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	ST		LAURA COBB	1591 ROSEMONT DR
XX Add				CLEARWATER, FL 33755
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove		34		
5) Change				
Add		<del></del>		
Remove				
6) Change				
Add				
Remove				

	' (Be specific)
<del> </del>	
orovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis analysis and an analysis
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	-
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ 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 shareholder action was not required.	
03/08/2017	
Dated	
Signature Wilbert Colb	<del></del>
(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 court appointed fiduciary by that fiduciary)	
WILBERT L COBB	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	