

P090000035037

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

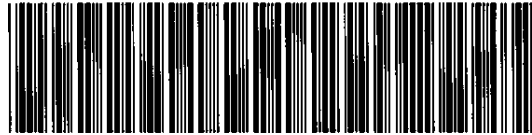
(Business Entity Name)

(Document Number)

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05/18/09--01009--006 \*\*35.00

*Amens*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JUN 17 PM 4:23

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 22, 2009

JAMIE WESTENHISER  
JW MARKETING AND CONSULTING  
6574 N. STATE RD 7 #268  
COCONUT CREEK, FL 33073

SUBJECT: JW MARKETING AND CONSULTING, INC.  
Ref. Number: P09000035037

We have received your document for JW MARKETING AND CONSULTING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

*phone number  
954-856-0653*

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please check only one box under the adoption of amendment:

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 509A00017448

RECEIVED  
2009 JUN 17 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** JW Marketing and Consulting, Inc

**DOCUMENT NUMBER:** P09000035037

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jamie Westenhiser  
Name of Contact Person

JW Marketing and Consulting  
Firm/ Company

6574 N. State Road 7 # 268  
Address

Coconut Creek, FL 33073  
City/ State and Zip Code

jamiewest777@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jamie Westenhiser at ( 904 ) 856-0653  
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:

- |   |  |  |   |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(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

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09 JUN 17 PM 4:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P09000035037

Page 1 of 3

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Jamie Westenhiser</u>	<u>1574 N. State Rd 7 #268</u> <u>Orangethorpe, FL 33073</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

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The date of each amendment(s) adoption: 5/13/09

Effective date if applicable: 5/13/09  
(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 shareholder action was not required.

Dated 5/13/09

Signature

Jamie Westenhiser  
(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)

Jamie Westenhiser

(Typed or printed name of person signing)

President

(Title of person signing)