P0900059107

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION:	Creative Capital Enterprise	es, Inc.	
DOCUMENT NUME	BER:	P09000059107		
The enclosed Articles	of Amendment and fee a	are submitted for filing.		
Please return all corres	spondence concerning th	is matter to the following:		
		ames Larry Nichols		
	1	Name of Contact Person		
	Jam	es Larry Nichols, P.A.		
		Firm/ Company		
	8191	College Parkway, #205		
		Address		
<u></u>	Fort Myers, FL 33919			
	C	City/ State and Zip Code		
	wendy(E-mail address: (to be use	@Inicholslaw.com ed for future annual report notification)		
For further information	n concerning this matter,	, please call:		
Wend	y McPherson	at (239)4	133-1305	
	Contact Person	Area Code & Daytime To	elephone Number	
Enclosed is a check fo	r the following amount r	made payable to the Florida Depar	rtment of State:	
✓ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addr Amendment So Division of Co P.O. Box 6327	ection rporations	Street Address Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Creative Cap	ital Enterprises, Inc.			
(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)		
P090	000059107			
(Document Num	ber of Corporation (if know	n)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this Flori	rida Profit Corporation (adopts the foll	owing
A. If amending name, enter the new name of	the corporation:			
Creative Wealt	h Capital Partners, Inc.		The new	
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,'	or "Co". A profession		
B. Enter new principal office address, if appl (Principal office address MUST BE A STREE			—≱ક્ષ ક	2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or registered agent and/or the new registered agent:	egistered office address in	Florida, enter the name	OF STATE	
New Registered Office Address:	(Florida street ad	dress)		
·		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changin I hereby accept the appointment as registered a	ng Registered Agent: gent. I am familiar with an ignature of New Registered		f the position.	
		J . J . J		

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)

Title	<u>Name</u>	Address	Type of Action
			Add Remove
			☐ Add ☐ Remove
			Add Remove
(attach d	additional sheets, if necessary). (Be	: specific)	
	mendment provides for an exchangions for implementing the amendm		
(if	not applicable, indicate N/A)	ent it not consumed in the am	endment Rsen.

The date of each amend	Iment(s) adoption: 7/13/09
	(date of adoption is required)
Effective date <u>if applica</u>	(no more than 90 days after amendment file date)
Adoption of Amendme	nt(s) (<u>CHECK ONE</u>)
	as/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
The amendment(s) w	as/were approved by the shareholders through voting groups. The following statemen rovided 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)
action was not requir	as/were adopted by the incorporators without shareholder action and shareholder
	7/13/09
Signat	(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)
	Wally Rudensky
	(Typed or printed name of person signing)
	Director _
	(Title of person signing)