P09000066678

(Re	questor's Name)	
(Ad	dress)	<u></u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
í (Bu	siness Entity Nan	ne)
	•	
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	·

Office Use Only

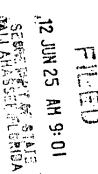


300226603093

06/15/12--01042--006 **10.00

300226603093 06/04/12--01009--019 **25.00

NC



JUN 2 7 2012

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations Christopher Lygard PA NAME OF CORPORATION: The Ligand Law Film PA
NAME OF CORPORATION: The Wigand Law Film PA
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Trease return an correspondence concerning this matter to the following.
Name of Confact Person
Firm/ Company
981 Sh Goth Ave
Address
- Plantation H 53317
City/ State and Zip Code
wigand co bells with net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher Wigand at 954 448-2775
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:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32314 Tallahassee, FL 32301





June 18, 2012

CHRISTOPHER WIGAND CHRISTOPHER WIGAND PA 981 SW 68TH AVENUE PLANTATION, FL 33317

SUBJECT: CHRISTOPHER WIGAND PA

Ref. Number: P09000066678

We have received your document for CHRISTOPHER WIGAND PA and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The wrong form was submitted.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 812A00016893



June 6, 2012

CHRISTOPHER WIGAND CHRISTOPHER WIGAND PA 981 SW 68TH AVENUE PLANTATION, FL 33317

SUBJECT: CHRISTOPHER WIGAND PA

Ref. Number: P09000066678

We have received your document for CHRISTOPHER WIGAND PA and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted. There is a balance of \$10.00 due, when the corrected form is returned.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 912A00016058

Articles of Amendment to

Articles of Incorporation

FILED 12 JUN 25 AM 9: 01

of	" OUN CO AM 9:
Christopher Wigand PA (Name of Corporation as currently filed with the Florida Dept. of State)	SENSE WAY OF ST TALLAHASSEE ALE
(Name of Corporation as currently filed with the Florida Dept. of State)	
P 09000 GGG 78	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adoptits Articles of Incorporation:	ots the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation word "chartered," "professional association," or the abbreviation "P.A."	The new ted" or the abbreviation on name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
. ————————————————————————————————————	

D. <u>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:</u>

Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

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	PT Jo	ohn Doe		
X Remove	<u>v</u> <u>w</u>	like Jones		
_X Add	<u>SV</u> <u>S</u>	ally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change Add Remove		<u> </u>		
2) Change Add Remove				
3) Change Add Remove				
4) Change Add Remove				
5) Change Add Remove		<u></u>		
6) Change Add Remove				

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)		
			 · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·			
			, <u>, ,</u>
-			
			· · · · · · · · · · · · · · · · · · ·
		·	
-			
•			
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nnge, reclassification, or dment if not contained i	cancellation of issued shan the amendment itself:	res,
			<u>-</u>

The date of each amendr	nent(s) adoption:
Effective date if applicat	ole:
	(no more than 90 days after amendment file date)
Adoption of Amendment	(CHECK ONE)
	s/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.
	s/were approved by the shareholders through voting groups. The following statement ovided for each voting group entitled to vote separately on the amendment(s):
"The number of v	votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was action was not required	s/were adopted by the board of directors without shareholder action and shareholder l.
The amendment(s) was action was not required	s/were adopted by the incorporators without shareholder action and shareholder i.
Dated_	C/22/12
Signatu	(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)
	(Typed or printed name of person signing)
	Praidet
	(Title of person signing)