P090001010001

(Re	questor's Name)	<u> </u>
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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SEPRETARY OF STATE

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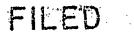


COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: WYMAN & SHIE	R FINANCIAL SERVICE	S, INC.
DOCUMENT NUMI			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	William J. Kananack		
		Name of Contact Perso	n
	Kananack Law LLC		
		Firm/ Company	
	100 Rialto Place, Suite 700		
		Address	
	Melbourne, FL 32901		
		City/ State and Zip Cod	e
wjk@)wjklaw.com		
	-	sed for future annual report	notification)
For further information William J. Kananack	n concerning this matter, pleas	se call:	726-8595
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		·
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



WYMAN & SHIER FINANCIAL SERVICES, INC.

P09000101021	·
	SECRETARY OF STATE.
(Documer	nt Number of Corporation (if known) TALL AHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florida S ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corr	poration:
SHIER FINANCIAL SERVICES, INC.	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	YESS)
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent	
Name of New Registerett Agent	
•	(Florida street address)
New Registered Office Address:	(Florida street address) . Florida

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>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	DVP	_	WILLIAM B. WYMAN	5420 BABCOCK STREET, NE
Add				SUITE110
X Remove				PALM BAY, FL 32905
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change	***			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
lf an a prov	nendment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself:	
(not applicable, indicate N/A)	
Α		

The date of each amendment(s) adoption:	, if other then the
date this document was signed.	
Effective date if applicable:	
(no more than 90 duys after am	iendmeni file datej
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient for	approval
бу	*
(volling group)	
☐ The amendment(s) was/were adopted by the board of directors without shareh action was not required.	nolder action and shareholder
☐ The ilmendment(s) was/were adopted by the incorporators without shareholde action was not required.	r action and shareholder
12/08/16	
Signature Todd N.M.	
(By a director, president or other officer — if director selected, by an incorporator — if in the hands of a reappointed fiduciary by that fiduciary)	
todd r. shier	
(Typed or printed name of person	n signing)
PRESIDENT	
(Title of person signi	ing)