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| (Re                                     | equestor's Name)  |             |  |
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| Certified Copies                        | _ Certificate:    | s of Status |  |
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JUL 1 5 2018 C. CARROTHERS



June 20, 2016

LARRY J WILDE 703 TANGELO CIRCLE WINTER GARDEN, FL 34787

SUBJECT: CLIENT ACQUISITION SERVICES INC.

Ref. Number: P11000024072

We have received your document for CLIENT ACQUISITION SERVICES 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):

ONLY CHECK ONE BOX ON PAGE 4 OF 4

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.

Letter Number: 616A00012926

Cathy A Carrothers Regulatory Specialist

www.sunbiz.org

## **COVER LETTER**

| TO: | Amendment Section        |
|-----|--------------------------|
|     | Division of Corporations |

| NAME OF CORPORA   | ATION: Client  | AcquisiTION   | Services INC   |  |
|---|--|---|--|--|
|   | ER: P1100002   | •   |  |  |
| The enclosed Articles of  | The enclosed Articles of Amendment and fee are submitted for filing. |   |  |  |
| Please return all correspondence concerning this matter to the following:   |  |   |  |  |
| Name of Contact Person  Cherit Acquisition Services INC.  Firm/ Company  703 Tangelo Ct.  Address  W. Nter Garden Fl. 34787  City/ State and Zip Code  Larry wilde 7 @ gma.l. Com  E-mail address: (to be used for future annual report notification) |  |   |  |  |
| E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  |  |   |  |  |
| Larry J. Wilde at (207) 929.2372  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:   |  |   |  |  |
|   | □\$43.75 Filing Fee & Certificate of Status                          | □\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
| Mail  | ling Address   | Street  | Address  |  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Amendment to Articles of Incorporation

|  | of  |  |
|--|---|--|
| Chent Acquisition (Name of Corporation as currently filed w  | Services INC                                    |  |
| (Name of Corporation as currently filed w  | ith the Florida Dept, of State)                 |  |
| P11000024072   |   |  |
| (Document Number of Corpo  | oration (if known)                              |  |
| Pursuant to the provisions of section 607.1006, Florida Stat Incorporation:  | utes, this corporation adopts the following an  | mendment(s) to its Articles of   |
| A. If amending name, enter the new name of the corpora   | ation:  |  |
| N A name must be distinguishable and contain the word "co  |   | The new  |
| name must be distinguishable and contain the word "co<br>"Corp.," "Inc.," or Co.," or the designation "Corp.," "In<br>word "chartered," "professional association," or the abbre | nc." or "Co". A professional corporation n      | or the abbreviation came must contain the  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  | <u>N</u> A                                      |  |
|  |   |  |
|  |   |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | N/A   | THE PARTY OF THE P |
|  |   | THE DE RESTREET  |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office   | fice address in Florida, enter the name of t    | _  |
| Name of New Registered Agent A   |   |  |
| ·  | Florida street address)                         |  |
| New Registered Office Address:   | (City) , Florida,                               | Zip Code)  |
|  | (Cily)  | Zip Code)  |
|  |   |  |
| New Registered Agent's Signature, if changing Registere  | d Agent:  |  |
| I hereby accept the appointment as registered agent. I am f  | familiar with and accept the obligations of the | ? position.  |

Page 1 of

N/17
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             | <u>PT</u>    | John Doe         |   |
|-------------------------------|--------------|------------------|---|
| X Remove                      | <u>v</u>     | Mike Jones       |   |
| X Add                         | <u>sv</u>    | Sally Smith      |   |
| Type of Action<br>(Check One) | <u>Title</u> | Name             | <u>Addres</u> s   |
| 1) Change                     | _D           | RICHARO J. Wilde | 15-130 Timber V. Ilage Ro<br>Lot #59<br>Groveland, F1 - 34736 |
| <b>X</b> Add                  |              |                  | LOT #59   |
| Remove                        |              |                  | Groveland, F1 - 3473 6  |
| 2) Change                     |              |                  |   |
| Add                           |              |                  |   |
| Remove                        |              |                  |   |
| 3) Change                     |              |                  |   |
| Add                           |              |                  |   |
| Remove                        |              |                  |   |
| 4) Change                     |              |                  |   |
| Add                           |              |                  |   |
| Remove                        |              |                  | <u></u>   |
| 5) Change                     |              |                  | ·   |
| Add                           |              |                  |   |
| Remove                        |              |                  | <del></del>   |
| 6) Change                     |              |                  |   |
| Add                           |              |                  | <u> </u>  |
| Remove                        |              |                  |   |

| Attach additional sheets, if necessary). | . (Be specific)   |
|--|---|
|  |   |
| N/A                                      |   |
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| an amendment provides for an exch        | ange, reclassification, or cancellation of issued shares, |
| ovisions for implementing the amen       | dment if not contained in the amendment itself:           |
| (if not applicable, indicate N/A)        |   |
| NIA                                      |   |
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| The date of each amendment(s) add date this document was signed.    | option: Jinge 8, 2016  | , if other than th |
|---|--|--------------------|
| Effective date if applicable:                                       | Tinc 8, 2016  (no more than 90 days after amendment file date)   |                    |
| mappicane.  | (no more than 90 days after amendment file date)   | <del></del>        |
| Adoption of Amendment(s)  | (CHECK ONE)  |                    |
| The amendment(s) was/were adop<br>by the shareholders was/were suff | ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.   |                    |
|   | oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): |                    |
| "The number of votes cast for                                       | or the amendment(s) was/were sufficient for approval   |                    |
| by  |  |                    |
| <u> </u>  | (voting group)   |                    |
| The amendment(s) was/were adopaction was not required.              | ted by the board of directors without shareholder action and shareholder   |                    |
| ☐ The amendment(s) was/were adopt action was not required.          | ted by the incorporators without shareholder action and shareholder  |                    |
| DatedO4   | 1.8/2016   |                    |
| Signature   | 1.8/2016<br>ang f Helle-   |                    |
| (By a di  | rector, president or other officer - if directors or officers have not been  |                    |
|   | , by an incorporator — if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)                               |                    |
| _   | Larry J. W./de (Typed or printed name of person signing)   |                    |
|   | (Typed or printed name of person signing)  |                    |
| _   | President<br>(Title of person signing)   |                    |
|   | (Title of person signing)  |                    |
|   | •  |                    |