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C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: WT VENTURES,	INC.					
DOCUMENT NUME							
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
	FRANK L. PIPER						
	Name of Contact Person						
	WT VENTURES, INC.						
	Firm/ Company						
	4248 HILLWOOD ROAD						
	Address						
	JACKSONVILLE, FL 32223	3					
		City/ State and Zip Code	<u> </u>				
FRA	NKPIPER67@GMAIL.COM						
		sed for future annual report	notification)				
For further information	n concerning this matter, pleas	se call:					
FRANK L. PIPER		904 at (710-9592				
Name of Contact Person		at (904) 710-9592 Area Code & Daytime Telephone Number					
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:				
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee 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	Address ment Section n of Corporations Building xecutive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

WT VENTURES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000074	6666	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	Clorida Profit Corporation adopts the foll	owing amendme
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Covord "chartered," "professional association," or the abbreviation "Inc.," or the abbreviation "Inc., and the principal office address, if applicable: [Principal office address MUST BE A STREET ADDRESS]	o". A professional corporation name n	he abbreviation nust contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stre	et address)	
New Registered Office Address:	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	th and accept the obligations of the posit	ion.
Signature of New Re	gistered 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 (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	v	FRANK L. PIPER	4248 HILLWOOD RD
xxx Add			JACKSONVILLE, FL 32223
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
N/A					
IVA					
E If an amount provides for an avalance malacrification an amount time of insured shares					
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)					
FRANK L. PIPER HAS RECEIVED FIFTEEN, (15) OF THE EXISTING ONE HUNDRED, (100) SHARES.					
<u> </u>					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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)	
(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.	
DatedAPRIL 19, 2016	
Signature	
(By a director, president or other of Rect – 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)	
FRANK L. PIPER	
(Typed or printed name of person signing)	<u></u>
VICE PRESIDENT	
(Title of person signing)	