## P12000/04689

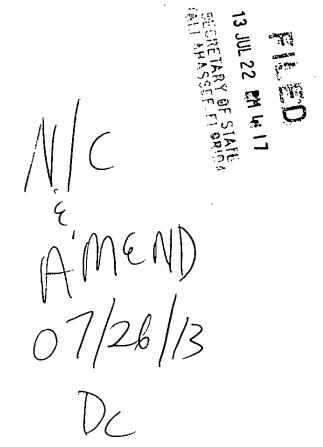
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: JAMES A	A. COLLEY, CFP INC.			
DOCUMENT NUMBER: P12000104				
The enclosed Articles of Amendment and fee are	e submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
SUSAN COLLE	ΞΥ			
	Name of Contact Person			
	Firm/ Company			
505 W INTERL	AKE BLVD			
	Address			
LAKE PLACID, FL 33852				
	City/ State and Zip Code			
SUSANCOLLEY@	EMBARQMAIL.COM			
	e used for future annual report notification)			
For further information concerning this matter, p	lease call:			
SUSAN COLLEY	at (863 ) 633-9098			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:			
S35 Filing Fee Certificate of Status				
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

JAMES A. COLLEY, CFP INC	J	4MES	Α.	COL	LEY,	CFP	INC
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JAMES A. COLLEY, CFP INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P12000104689	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following ts Articles of Incorporation:	amendment(s) to
A. If amending name, enter the new name of the corporation:	
JAMES A. COLLEY, INC	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the able "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must coword "chartered," "professional association," or the abbreviation "P.A."	
3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS   2. Control of the street address of the street	= 22
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. 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:	
IAMES A COLLEY	
Name of New Registered Agent	
505 W INTERLAKE BLVD	
(Florida street address)  New Registered Office Address: LAKE PLACID, Florida 33852	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  Thereby 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 John	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VPD	COLLEY, SUSAN L	300 HIGHLANDS LAKE DR
Add			LAKE PLACID, FL 33852
X Remove			
2) Change			<del> </del>
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

- "	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	7/18/2013	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHE	ECK ONE)	
☐ The amendment(s) was/were adopted by the siby the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) opproval.	
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
	dment(s) was/were sufficient for approval	
by	ng group)	
(voti	ng group)	
	poard of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the in action was not required.	ncorporators without shareholder action and shareholder	
Dated 7/18/13	3	
	dent or other officer of directors or officers have not been reporator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
	S A. COLLEY	_
	(Typed or printed name of person signing)	

**PRESIDENT** 

(Title of person signing)