P13000039037

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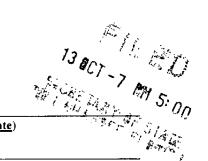
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10/15/13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: WA OF FLE	ETCHER INC	
DOCUMENT NUMBER: P1300003903		
The enclosed <i>Articles of Amendment</i> and fee are su	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
MAXWELL CIPR	IANI	
	Name of Contact Persor	1
WA OF FLETCH		
	Firm/ Company	
1521 W FLETCH	ER AVENUE	
	Address	
TAMPA, FL 3361	2	
	City/ State and Zip Code	2
RADIANT813@GMA	AL.COM	
	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
MAXWELL CIPRIANI	at (714	390-0493
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment 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 2661 E	Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of



WA OF FLETCHER INC

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

P13000039037

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	e word "corporation," "company," "Corp," "Inc," or "Co". A professi or the abbreviation "P.A."	or "incorporated" or th ional corporation name m	The n ne abbreviati nust contain i
Enter new principal office address, if appli			
rincipal office address <u>MUST BE A STREET</u>	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>		
			
If amending the registered agent and/or re new registered agent and/or the new regist		enter the name of the	
new registered agent and/or the new regist			
new registered agent and/or the new regist	tered office address:		
Name of New Registered Agent	(Florida street address)		
new registered agent and/or the new regist	(Florida street address)		·)
Name of New Registered Agent	tered office address: (Florida street address)		·····
Name of New Registered Agent	(Florida street address) (City)		·)

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)

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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	FEI POON	1521 W FLETCHER AVENUE
X Add			TAMPA, FL 33612
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			,
Add			
Remove			
6) Change			
Remove			

ttach <i>additional</i> .	Iding additional Art sheets, if necessary).	(Be specific)			
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lf an amendment	provides for an excl	hange, reclassifi	cation, or cancella	tion of issued sha	ires,
	nplementing the amerable, indicate N/A)	endment if not co	ontained in the am	endment itself:	
(у погаррис	une, maicule way				
		·	·		

OCTOBER 1, 2013 The date of each amendment(s) adoption: , if other than the date this document was signed. CTOBER 1, 2013 Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) ☐ 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 east for the amendment(s) was/were sufficient for approval (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. CTOBER 1, 2013 Signature (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) MAXWELL CIPRIANI (Typed or printed name of person signing) **PRESIDENT**

(Title of person signing)