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| ess Entity Name) | | |
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| Certificates of Status | | |
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Office Use Only



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Amend 602/24/14

COVER LETTER

TO: Amendment Section
Division of Corporations

| Division of Corpo | rations | | | | | | |
|------------------------------|---|--|---|--|--|--|--|
| NAME OF CORPOR | ATION: KW Coun ER: P140000069 | seling, Charte 990 | ered | | | | |
| | of Amendment and fee are su | | | | | | |
| | | _ | | | | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | | | | |
| · | William H. Walker | | | | | | |
| - | Name of Contact Person Law Office of William H. Walker, Chartered | | | | | | |
| 4699 Central Avenue, Ste 102 | | | | | | | |
| | St. Petersburg, FL 33713 | | | | | | |
| - | 1 1 No. 10 10 10 10 10 10 10 10 10 10 10 10 10 | City/ State and Zip Code | | | | | |
| <u>wh</u> | w@walkeratty. E-mail address: (to be us | com sed for future annual report | notification) | | | | |
| For further information | concerning this matter, pleas | se call: | | | | | |
| William H. \ | Valker | _{at (} 727 | 821-3060 de & Daytime Telephone Number | | | | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | | | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | ertment 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) | | | | |
| Ame Divis P.O. | ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314 | Amend Divisio Clifton 2661 E | Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301 | | | | |

Articles of Amendment to **Articles of Incorporation**



KW Counseling, Chartered

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

P14000006990

ent(s) to

| (Documer | nt Number of Corporation (if | known) | |
|--|--------------------------------|------------------------------------|---------------------------|
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this A | Florida Profit Corporation ad | opts the following amendm |
| A. If amending name, enter the new na | ame of the corporation: | | |
| name must be distinguishable and con | tain the word "cornoration | " "anmaun " or "livoorno | The ne |
| "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or "c | Co". A professional corpora | |
| B. Enter new principal office address, | if annlicable: | N/A | |
| (Principal office address MUST BE A S | | | |
| | | | |
| | | | |
| C. Enter new mailing address, if appli | | N/A | |
| (Mailing address <u>MAY BE A POST</u> | OFFICE BOX) | 14// \ | |
| | | | |
| | | | , |
| D 16 11 11 14 1 | 1/ 1/ 1/00 . 1.1 | | |
| D. If amending the registered agent an new registered agent and/or the new | | | ie of the |
| Name of New Registered Agent | N/A | | |
| Name of New Registerea Agent | | | |
| | (Florida stre | net address) | |
| | NI/A | , | |
| New Registered Office Address: | (City) | , Florida_ | (Zip Code) |
| | • | | · |
| | | | |
| New Registered Agent's Signature, if c | | dati and a compation at the strong | Cal iai |
| I hereby accept the appointment as regist | erva agent i am jamiliar v | un unu accept the obligation: | voj ine position. |
| | and the of Maria Davids and A | and if the area | |

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: | че, ана за | ny Smun, Sv as an Ada. | |
|----------------------------|--------------|------------------------|-------------------|
| 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> | Name | Address |
| 1) Change | Р | Kelly Walker | 3266 Helen Avenue |
| Add | | | Orlando, FL 32804 |
| Remove | | | |
| 2) Change | T | Kelly Walker | 3266 Helen Avenue |
| ✓ Add | | | Orlando, FL 32804 |
| Remove | | | |
| 3) Change | S | Kelly Walker | 3266 Helen Avenue |
| Add | | | Orlando, FL 32804 |
| Remove | | | |
| 4) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 5) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 6) Change | | N/A | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | | | |
|--|--|--|--|--|
| | | | | |
| N/A | | | | |
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| 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) | | | | |
| N/A | | | | |
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| The date of each amendment(s) adoption: date this document was signed. | , if other than the |
|--|---------------------|
| Effective date if applicable: N/A | |
| (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 cast for the amendment(s) was/were sufficient for approval | |
| by" (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. | |
| Dated February 19, 2014 | |
| Signature Kelly Walker | |
| (By a director, president be 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) | |
| Kelly Walker | |
| (Typed or printed name of person signing) | <u> </u> |
| PTS | |
| (Title of person signing) | _ |