P14000012002

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COVER LETTER

TO: Amendment Section Division of Corporations JULE RAYMOND & ASSOCIATES, INC. NAME OF CORPORATION: P14000012002 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JULE RAYMOND Name of Contact Person JULE RAYMOND & ASSOCIATES, INC. Firm/ Company 1866 BELLEAIR ROAD Address CLEARWATER, FL 33764 City/ State and Zip Code JBDESK@SUNSETACCOUNTING.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 531-4560

Area Code & Daytime Telephone Number JULE RAYMOND Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & - . □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation

JULE RAYMOND & ASSOCIATES, INC.

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

P14000012002

(Document Number of Corporation (if known)

nent(s) to

A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation,"	The ne
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain to
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office address in the new registered agent and/or the new registered office address:	n Florida, enter the name of the
Name of New Registered Agent NA	
New Registered Office Address: (Florida street ad	dress), Florida (Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a Signature of New Registered Agent	
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 <math>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	JOY JOHNSON	1866 BELLEAIR ROAD
Add			CLEARWATER, FL 33764
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
•	N/A
	14//
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
If an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an and an analysis of the samendment itself: N/A
provisions for implementing the amer	ndment if not contained in the amendment itself:
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provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(s) add	option: 3/10/2014	, if other than the
date this document was signed.		
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	sted 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 f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	eted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	sted by the incorporators without shareholder action and shareholder	
Dated3	3/31/2014	
Signature	Much	_
selected	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 court by that fiduciary)	
	JULE RAYMOND	
-	(Typed or printed name of person signing)	
_	PRESIDENT	
	(Title of person signing)	