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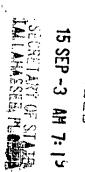
| (Address)                               | · |  |  |  |
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| (Business Entity Name)                  |   |  |  |  |
| (Document Number)                       |   |  |  |  |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORA  | ATION: WOODRUFF HO                         | USE ENTERPRISES, INC.  |  |  |  |  |
|--|--|--|--|--|--|--|
| DOCUMENT NUMBI   | ER: P14000048131                           |  |  |  |  |  |
| The enclosed Articles of   | f Amendment and fee are su                 | bmitted for filing.  |  |  |  |  |
| Please return all corresp  | ondence concerning this ma                 | tter to the following:   |  |  |  |  |
| J  | O ANN M. KOONTZ                            |  |  |  |  |  |
| _  |  | Name of Contact Person   | n  |  |  |  |
| <b>K</b>   | COONTZ & ASSOCIATES,                       | PL   |  |  |  |  |
| _  | Firm/ Company                              |  |  |  |  |  |
| 1  | 819 MAIN STREET, SUIT                      | E 910  |  |  |  |  |
| Address  |  |  |  |  |  |  |
| S  | ARASOTA, FL 34236                          |  |  |  |  |  |
| _  |  | City/ State and Zip Cod  | е  |  |  |  |
| JOAN   | n@KOONTZASSOCIATES                         | S.COM  |  |  |  |  |
| <del></del>  | E-mail address: (to be us                  | sed for future annual report                                       | notification)  |  |  |  |
| For further information  | concerning this matter, pleas              | se call:   |  |  |  |  |
| JO ANN M. KOONTZ   |  | at (   | ) 225-2615   |  |  |  |
| Name of Contact Person   |  | Area Code & 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<br>Divisio<br>Clifton  | Address Iment Section on of Corporations Building Executive Center Circle              |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

WOODRUFF HOUSE ENTERPRISES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P14000048131 (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: A. If amending name, enter the new name of the corporation: RACHEL WOODRUFF, PA The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: JO ANN M. KOONTZ Name of New Registered Agent 1819 MAIN STREET, SUITE 910 (Florida street address) SARASOTA New Registered Office Address: Florida (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby 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          | <u>PT</u> .                           | John Doe        |                      |
|----------------------------|---------------------------------------|-----------------|----------------------|
| X Remove                   | <u>V</u>                              | Mike Jones      |                      |
| X Add                      | <u>sv</u>                             | Sally Smith     |                      |
| Type of Action (Check One) | Title                                 | <u>Name</u>     | <u>Addres</u> s      |
| 1) Change                  | PTSD                                  | DENNIS WOODRUFF | 12517 TALL PINES WAY |
| Add                        |                                       |                 | LAKEWOOD RANCH, FL   |
| X Remove                   |                                       |                 | 34202                |
| 2) Change                  | VP, D                                 | RACHEL HOUSE    | 12517 TALL PINES WAY |
| Add                        | <del> </del>                          |                 | LAKEWOOD RANCH, FL   |
| X Remove                   |                                       |                 | 34202                |
| 3) Change                  | P,D                                   | RACHEL WOODRUFF | 12517 TALL PINES WAY |
| X Add                      |                                       |                 | LAKEWOOD RANCH, FL   |
| Remove                     |                                       |                 | 34202                |
| 4) Change                  |                                       |                 |                      |
| Add                        |                                       |                 |                      |
| Remove                     |                                       |                 |                      |
| 5) Change                  | · · · · · · · · · · · · · · · · · · · | <del></del>     |                      |
| Add                        |                                       |                 |                      |
| Remove                     |                                       |                 | <del> </del>         |
| 6) Change                  | <del></del>                           |                 |                      |
| Add                        |                                       |                 |                      |
| Remove                     |                                       |                 |                      |

| E. If amending or adding additional Articological (Attach additional sheets, if necessary). | cles, enter change(s) here:                               |
|---|---|
| PURPOSE: REAL ESTATE SALES  | (De specyle)  |
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| E. If an amondment provides for an arch   | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer  | ange, reclassification, or cancernation of issued shares, |
| (if not applicable, indicate N/A)   |   |
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| The date of each amendment(s) adoption:   | , if other than the                 |
|---|-------------------------------------|
| date this document was signed.  |                                     |
| Effective date <u>if applicable</u> :   |                                     |
| (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, document's effective date on the Department of State's records.                          | this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)  |                                     |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.   | dment(s)                            |
| The amendment(s) was/were approved by the shareholders through voting groups. The following 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 sha action was not required.   | reholder                            |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareho action was not required.  | lder                                |
| JULY 15, 2015   |                                     |
| Signature Sull Doduk  |                                     |
| (By a director, president or other officer 4 if directors or officers have no   |                                     |
| selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)  | er court                            |
| RACHEL WOODRUFF   |                                     |
| (Typed or printed name of person signing)   |                                     |
| PRESIDENT & DIRECTOR  |                                     |
| (Title of person signing)   |                                     |