

Division of Corporations Electronic Filing Cover Sheet

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(((H140001774113)))



H140001774113ABC-

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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : CORP USA
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Phone : (305)634-3694
Fax Number : (786)409-5946

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN WHS AGENCY, INC.

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Electronic Filing Menu

Corporate Filing Menu

Help



H140000T7411

COVER LETTER

TO: Amendment Sec Division of Corp						
NAME OF CORPOR	RATION: WHS Ager	icy, Inc.				
DOCUMENT NUM	BER: P1400006159	96				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	David A. Coven,					
	David A. Coven,	Name of Contact Person P.A.	n			
	0050 5 0-1/	Firm/ Company				
	2856 E. Oakland					
	Address Ft. Lauderdale, FL 33306					
		City/ State and Zip Cod	9			
Co	venesq@gmail.co	om				
E-mail address: (to be used for future annual report notification)						
For further informatio	n concerning this matter, pleas	se call:				
David A. Coven at 954 565-8410 Name of Contact Person Area Code & Daytime Telephone Nu			565-8410			
Name	of Contact Person	Area Co	de & Dayame Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Foe Certificate of Status Certified Copy (Additional Copy is enclosed)			
	ling Address		Address			
	eion of Corporations		илет Section на of Corporations			
P.O.	. Box 6327	Clifton Building				
Tall	ahasvee, FL 32314		executive Center Circle			

850-617-6381



July 28, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

WHS AGENCY, INC.
****FAX FILE****CORP USA****
COCONUT CREEK, FL 33073

SUBJECT: WES AGENCY, INC.

REF: P14000061596

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

There should be a comma between the words AGENCY and INC. in the entity name.

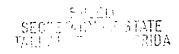
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter Regulatory Specialist FAX Aud. #: H14000177411 Letter Number: 714A00016090

RECEIVED
14 JUL 28 PM 4: 42
PM SIGNER SERVER FOR THE PROPERTY OF THE PROPERTY

P.O BOX 6327 - Tallahassee, Florida 32314



Articles of Amendment to Articles of Incorporation of

14 JUL 25 Mill: 54

WHS Ageлcy Inc.		
	ently filed with the Florida Dept. of State)	
P14000061596		
(Document Nun	nber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	Florida Statutos, this Florida Profit Corporation adopte	s the following amendment(s) t
A. If smonding name, enter the new name of	(the corporation:	
		The new
	he word "corporation," "company," or "incorporate "Corp," "Inc," or "Co". A professional corporation or the abbreviation "P.A."	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	licable: TADDRESS)	
	المراقب من القامل و دور و المراقب و المراقب و المراقب و المراقب و المراقب المراقب و ا	
C. Enter new mailing address, if applicable: (Mulling address MAY BE A POST OF FIG.		 _
		
D. If amending the registered agent and/or r new registered agent and/or the new regis	egistered office address in Florida, enter the nume of stored office address:	<u>f the</u>
Name of New Registered Agent		
	(Florida street address)	
	,	
New Registered Office Address:	(Cuy) , Florida	(Zip Code)
New Registered Agent's Signature, if changle		
I hereby accept the appointment as registered a	gent. I am familiar with and accept the obligations of	the position,
Signatu	re of New Registered Agent, If changing	

Page 1 of 4

nddress of each Officer is (Attach additional sheets, Please note the officer/dir P = President; V= Vice I Executive Officer; CFO held. President, Treasures Changes should be noted	and/or U if necess rector till President - Chief I r, Directo in the fo	drector being aid ary) by the first lette, T— Treasurer; Tinancial Officer. ar would be PTD. Illowing manner. proporation, Sally	dod: r of the office title: S= Secretary; D= Director; If an officer/director holds Currently John Doe is listed Smith is named the V and S.	Afficer/director being removed and title, name, and TR = Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
X Change	PT	<u> John Doc</u>		
X Remove	Y	Mika Jones		
_X Add	<u>5Y</u>	Selly Smith		
Type of Action (Check One)	Title	Name		Address
1) Change	Р	Gabr	iel Souza	3450 W. Hillsbore Blvd #103
Add				Coconut Creek, FI 33073
Remove				
2) Change	\$	Walte	er Souza	Coconut Creek, F1 33073
Add				Coconut Creek, FI 33073
Remove				
3 } Change		····		
Add				
Remove				
4) Change		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Add				- 3
Romove			•	
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

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nmending or adding additional Artiach additional sheets, if necessary)	(Be specific)				
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	<u> </u>	<u></u>		<u></u>	
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	-1		Alladian ad la	errad aboves	
an amendment provides for an exc rovisions for implementing the am	endment if not	contained in th	ie vwerginen Genytion at b	t itself:	
(if not applicable, indicate N/A)					
	-				
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The date of each amendment	t(s) adoption: 7/25/2014	, if other than the
date this document was signed		
Effective date if applicable:	7/25/2014	
Extractive date it applicante.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amandment(s) ere sufficient for approval.	
The amendment(s) was we must be separately provide	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
action was not required.	to Booked by 1:56 (Bookharstors without 2) and some source and some source.	
Dated 7/25	5/2014	
Signature _	Water Sonz	
34	by a director, president or other officer - if directors or officers have not been elected, by an incorporator - if in the hands of a receiver, trustee, or other court populated fiduciary by that fiduciary)	
•	Walter Souz-	
	(Typed or printed name of purson signing)	
	(Title of person signing)	
	(Title of person signing)	

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