## P14000 6391

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(Address)			
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(Document Number)			
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C. GOLDEN 00T 1 0 2020

## **COVER LETTER**

TO: Amendment Section Division of Corporation	ns			
NAME OF CORPORATION DOCUMENT NUMBER:	ON: 21,2ab	16 Huerto	L, PA	
DOCUMENT NUMBER:	_P1400	0044391	·	
The enclosed Articles of An	nendment and fee are su	bmitted for filing.		
Please return all corresponde	ence concerning this ma	tter to the following:		
	Elizabet	Name of Contact Person The Willia	M500	
	dba: 1	he Willia	anson Team	
	10820	Firm/Company  Sharon	DR.	
	N. F.	+ My (AS,	FL 339,7	
		,	10 g ma; 1. Com	
For further information conc	cerning this matter, pleas	se call:		
Elizabith	Williamso	n at (239	, 728-8313	
Name of Cor	Hact Person	Area Coc	le & Daytime Telephone Number	
Enclosed is a check for the f	following amount made	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee □	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing A			Address	
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee				
	ee, FL 32314		! Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment

Articles of Incorporation

C. c // of /	0.4
Clizabeth Huerto	2 PA 25 11.95
(Name of Corporation as currently filed v	with the Florida Dept. of State)
P1400004V	<i>391</i>
(Document Number of Corpor	ation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  21122bth Williams of name must be distinguishable and contain the word "corporation," "company "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profes	;" or "incorporated" or the abbreviation "Corp.,"
"chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	0820 Sharon DR . Ft. Myers, FL 33917
	0820 Sharon DR Ft. Myers, FC 33917
D. If amending the registered agent and/or registered office address in page 1 new registered agent and/or the new registered office address:	lorida, enter the name of the
Name of New Registered Agent	
(Florida street addre	SS)
New Registered Office Address:	, Florida
(City)	(Zip Code)
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 Registere	d Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	· · · ·

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				<u></u>
Remove				···
2) Change		<del>-</del>		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add			<del></del>	
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
<del></del> -	·
	_
F. If an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	<u>s.</u>

The date of each amendment(s) ad	option:		, if other than
date this document was signed.  Effective date if applicable:	0/24	20	
	(ne	more than 90 days afte	er amendment file date)
Note: If the date inserted in this bloodocument's effective date on the Dep	ock does not moartment of Stat	neet the applicable statute's records.	ntory filing requirements, this date will not be listed as
Adoption of Amendment(s)	(CHEC	K ONE)	
The amendment(s) was/were adoption was not required.	oted by the inco	orporators, or board of d	lirectors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf			of votes east for the amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e			
"The number of votes cast f	or the amendme	ent(s) was/were sufficie	ent for approval
by			
	(voting g	group)	
Dated	24/20		
Signature	Jabren		nim
selected		rator – if in the hands of	rectors or officers have not been f a receiver, trustee, or other court
-	Eliz	eabith h	Villianson_
	(Typ	ed or printed name of po	erson signing)
-		President	
	(Title	e of person signing)	