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COVER LETTER

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TO: Amendment Section
Division of Corporations

| NAME OF CORPO | ORATION: WACHHOLDER & | & DEFINO, P.A. | |
|-----------------------|---|--|---|
| DOCUMENT NUM | P14000080839 | | |
| The enclosed Article | es of Amendment and fee are sul | omitted for filing. | |
| Please return all cor | respondence concerning this mat | ter to the following: | |
| | BARRY WACHHOLDER | | |
| | | Name of Contact Person | n |
| | WACHHOLDER & COMPA | NY, P.A. | |
| | | Firm/ Company | _ |
| | 300 S PINE ISLAND RD ST | | |
| | - | Address | |
| | PLANTATION, FL 33324 | | |
| | | City/ State and Zip Cod | e |
| . • | . 415 1 65 14 15 67 5 47 5 17 7 | , | |
| <u> </u> | MIN@WDTAX.NET | | |
| | h-mail address: (to be us | ed for future annual report | notification) |
| For further informat | ion concerning this matter, pleas | e call: | |
| BARRY WACHHO | OLDER | 954 at (| 906-1000 |
| Nam | e of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check | for the following amount made p | 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) |
| A D P. | ailing Address mendment Section (vision of Corporations O. Box 6327 dlahassee, FL 32314 | Ameno Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301 |

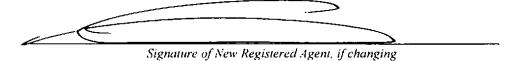
Articles of Amendment to Articles of Incorporation of

| WACHHOLDER & DEFINO. P.A | W۸ | CHHOL | DER 4 | E DEI | :ONI: | P.A |
|--------------------------|----|-------|-------|-------|-------|-----|
|--------------------------|----|-------|-------|-------|-------|-----|

| its Articles of Incorporation: A. If amending name, enter the new name of the corporation: WACHHOLDER & COMPANY, P.A. 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) | (<u>Name o</u> | of Corporation as currently | <u>filed with the Florida Dept</u> | t. of State) | |
|--|---|--------------------------------|------------------------------------|---------------------------------------|-----------------|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: WACHHOLDER & COMPANY, P.A. 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 MAYBE 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | P14000080839 | | | | |
| A. If amending name, enter the new name of the corporation: WACHHOLDER & COMPANY, P.A. 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | | (Document Number of C | Corporation (if known) | | |
| 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this F | lorida Profit Corporation ac | dopts the following | amendment(s) to |
| 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | A. If amending name, enter the new na | me of the corporation: | | | |
| 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | WACHHOLDER & COMPANY, P.A. | | | | The new |
| 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | "Corp.," "Inc.," or Co.," or the design | ation "Corp." "Inc." or "C | o'. A professional corporc | | |
| 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: Name of New Registered Agent BARRY WACHHOLDER 300 S PINE ISLAND RD STE 105 | | | | | |
| 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: Name of New Registered Agent BARRY WACHHOLDER | | | | ALL ARABASSE CONTRACTOR | |
| Name of New Registered Agent 300 S PINE ISLAND RD STE 105 | | | ss in Florida, enter the nan | ne of the | <u>125</u> |
| 300 S PINE ISLAND RD STE 105 | Name of New Registered Agent | BARRY WACHHOLDER | | | |
| (Florida street address) | | 300 S PINE ISLAND RD S | TE 105 | | |
| | | (Florida stree | t address) | | |
| New Registered Office Address: PLANTATION 33324 | New Registered Office Address: | PLANTATION | | , Florida 33324 | |
| (City) (Zip Code) | | (0 | Tity) | · · · · · · · · · · · · · · · · · · · | ode) |

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.



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 Do | <u>oe</u> | |
|-------------------------------|--------------|-------------|-------------|-----------------|
| X Remove | <u>v</u> | Mike Jo | nes | |
| 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 |
| l)Change | | | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | <u></u> |
| Remove | | | | |
| 3) Change | | | | |
| Add | | | | |
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| 4) Change | | <u> </u> | | |
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| 5) Change | | _ | | |
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| Remove | | | | <u> </u> |
| Character (Character) | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| (Attac | amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific) | |
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| pro | an amendment provides for an exchange, reclassification, or cancellar rovisions for implementing the amendment if not contained in the am (if not applicable, indicate N/A) | tion of issued shares, endment itself: |
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| The date of each amendment(s) ad | option: | if other than th |
|--|---|---------------------------------------|
| 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 b document's effective date on the De | lock does not meet the applicable statutory filing requirements, this doartment of State's records. | ate will not be listed as th |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendment flicient for approval. | (s) |
| | roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s): | aeni |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | n | |
| | (voting group) | |
| The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and sharehold | der |
| ☐ The amendment(s) was/were ado action was not required. | pted by the incorporators without shareholder action and shareholder | |
| 01/09/2018 | | |
| Dated | | |
| Signature | CPA | |
| (By a di 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 could fiduciary by that fiduciary) | |
| | BARRY WACHHOLDER | |
| • | (Typed or printed name of person signing) | |
| | PRESIDENT | |

(Title of person signing)