P1400091929

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MMM 13/15/14

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: South Walton Accounting Goup DOCUMENT NUMBER: P 14000 91929
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donna Anderson Name of Contact Person South Walton Accounting Group Inc Firm/Company 581 Little Canal Drive Santa Rosa Beach F1 32459 City/ State and Zip/Code donna @ Sowal coa. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: at (890) 8557123
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address 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 to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State)
P 14000091929
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(sits Articles of Incorporation:
A. If amending name, enter the new name 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) 581 Little Card Dr. 581 Little Card Dr. 584 Rock Beach FC 3845
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 581 Liftle Canal Dr Santa Rosa Beach FL 3245
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 581 Little Canally. (Florida street address)
New Registered Office Address: Santa Rosa Blach, Florida 32459 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Van 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.

Mike Jones, V as Kemove	e, ana Sai	lly 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>	Address
Change Add	7	Sistrunk Kathyr	5 141 Richer Aug Santa Rosa Beach FC 3245
Remove			
2) Change	7	Anderson, Doma	581 Little Caral Dr
Add Remove			Surth Rosa Beach FC 32459
3) Change	VP	Maritich Margard	65 Indian Bayou Dr
Add Remove			Destin FL 32541
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)							
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			4				
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		<u> </u>					
			·				
							
provisions	dment provides for an exc for implementing the am applicable, indicate N/A)	hange, reclassifi endment if not c	cation, or cance ontained in the a	llation of issued sl amendment itself:	hares,		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/8/14	
Signature	_
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
A t	
Donna Anderson	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_