P1500039552

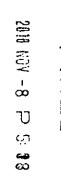
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: WILLIAM VAND	ERBROOK, D.C. P.A.		
DOCUMENT NUMI	P15000030552		···	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	SCOTT E ITKIN			
		Name of Contact Person	1	
	SOUTH FLORIDA TAX			
		Firm/ Company		
	12401 ORANGE DRIVE, STE 222			
	Address			
	DAVIE, FL 33330			
	City/ State and Zip Code			
SFT/	AX@AOL.COM			
	~	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas			
SCOTT E ITKIN		at (
Name	of Contact Person	at (954) 458-2000 Area Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtiment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 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, F1, 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

WILLIAM VANDERBROOK, D.C. P.A.		
(Name of Corporati	ion as currently filed with the Florid:	i Dept. of State)
P15000039552		
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A professional c	ncorporated" or the abbreviation
B. Enter new principal office address, if applicable	e:	
(Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or registe		te name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
New Registerea Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	gistered Agent:	
I hereby accept the appointment as registered agent.	Tam familiar with and accept the obti-	eations of the position
		8 1
Sign	nature of New Registered Agent, if char	nging co
		To IT
		• ••

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.

X Change	<u>PT</u>	John Doe	
\underline{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>	<u>Addres</u> s
1) Change	þ	WILLIAM C. VANDERBROOL	12041 ORANGE DRIVE STE 222
Add			DAVIE, FL 33330
X Remove			
2) Change	Р	WH.LIAM F. VANDERBROOK	12401 ORANGE DRIVE STE 222
X Add			DAVIE, FL 33330
Remove			
3) Change			
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or (Attach addition)	adding additional Article sheets, if necessary).	icles, enter change (Be specific)	(s) here:		
N/A		1 7//			
 					
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		· · · · · · · · · · · · · · · · · · ·			
					
		=			
C 10	nt provides for an exch		ina na anasaltati	on of bossed cham	
provisions for	implementing the ame	ndment if not cont	tained in the amer	on or issued shard idment itself:	<u>-5,</u>
	licable, indicate N/A)				
N/A					
				-	

	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(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, this document's effective date on the Department of State's records.	s 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 amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"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 shareh action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	:
NOVEMBER 5, 2018 Dated	
Signature	
(Refrector, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
WILLIAM F. VANDERBROOK	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	

. . . .