# P1500059996

| (Rec                      | questor's Name)   |             |
|---------------------------|-------------------|-------------|
| (Add                      | iress)            | <del></del> |
| (Add                      | dress)            |             |
| (City                     | //State/Zip/Phone | e #)        |
| PICK-UP                   | ☐ WAIT            | MAIL        |
| (Bus                      | siness Entity Nan | ne)         |
| (Doc                      | cument Number)    |             |
| Certified Copies          | Certificates      | s of Status |
| Special Instructions to F | Filing Officer:   |             |
|                           |                   |             |
|                           |                   |             |
|                           |                   |             |

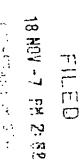
Office Use Only



800320364208

11/07/18--010:3--027 \*\*65.00

S. TALLENIT NOV 1 4 2018



MC

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: C & M PLACEME                       | ENT SERVICES, INC.   |  |  |
|-------------------------|---|--|--|--|
| DOCUMENT NUMI           | BER: P15000059996                           |  |  |  |
| The enclosed Articles   | of Amendment and fee are su                 | bmitted for filing.  |  |  |
| Please return all corre | spondence concerning this ma                | tter to the following:   |  |  |
|                         | LORI M. DORMAN, ESQ.                        |  |  |  |
|                         | <del> </del>                                | Name of Contact Person   | 1  |  |
|                         | BAKER, PAUL & DORMA                         | N  |  |  |
|                         |   | Firm/ Company  |  |  |
|                         | 515 9TH STREET E, SUITE                     | 100  |  |  |
|                         |   | Address  |  |  |
|                         | BRADENTON FL 34208                          |  |  |  |
|                         |   | City/ State and Zip Code   | c  |  |
| mega                    | nn@thecandmgroup.com                        |  |  |  |
|                         | E-mail address: (to be us                   | sed for future annual report                                       | notification)  |  |
| For further information | n concerning this matter, pleas             | se call:   |  |  |
| LORI DORMAN             |   | at (   | 747-0888   |  |
| Name of Contact Person  |   | Area Code & Daytime Telephone Number                               |  |  |
| Enclosed is a check fo  | r the following amount made                 | payable to the Florida Depa  | artment of State:  |  |
| S35 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) |  |
|                         | ling Address                                |  | Address  |  |
|                         | endment Section                             |  | Iment Section  |  |
|                         | sion of Corporations Box 6327               |  | on of Corporations<br>Building   |  |
|                         | ahassee, FL 32314                           | 2661 Executive Center Circle                                       |  |  |

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

C & M GROUP PLACEMENT SERVICES, INC.

| on (if known)  of the Florida Dept. of State)  on (if known)  of the Corporation adopts the following amendment(s) to |
|---|
|   |
| ofit Corporation adopts the following amendment(s) to   |
|   |
|   |
| , The new   |
| any," or "incorporated" or the abbreviation of the contain the  |
| -1:;; co  |
|   |
|   |
| ida, enter the name of the  |
|   |
|   |
|   |
| . Florida   |
| (Zip Code)  |
|   |

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>    | <u>John Do</u> | <u>e</u> |                 |
|-------------------------------|--------------|----------------|----------|-----------------|
| X Remove                      | <u>v</u>     | Mike Jo        | nes      |                 |
| X Add                         | <u>SV</u>    | Sally Sn       | nith     |                 |
| Type of Action<br>(Check One) | <u>Title</u> |                | Name     | <u>Addres</u> s |
| 1) Change                     |              | _              |          |                 |
| Add                           |              |                |          |                 |
| Remove                        |              |                |          |                 |
| 2) Change                     |              | _              |          |                 |
| Add                           |              |                |          | <del></del>     |
| Remove                        |              |                |          |                 |
| 3) Change                     |              | _              |          |                 |
| Add                           |              |                |          |                 |
| Remove                        |              |                |          |                 |
| 4) Change                     |              | _              |          |                 |
| Add                           |              |                |          |                 |
| Remove                        |              |                |          |                 |
| S) Character                  |              |                |          |                 |
| 5) Change                     |              |                |          |                 |
| Add                           |              |                |          |                 |
| Remove                        |              |                |          |                 |
| 6) Change                     |              | _              |          |                 |
| Add                           |              |                |          |                 |
| Remove                        |              |                |          |                 |

| Attach additional sheets, if necessary).                                  | (Be specific)     |                   |                   |          |          |
|---|-------------------|-------------------|-------------------|----------|----------|
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          | <u> </u> |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
| ·   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   | •                 |                   |          |          |
|   |                   |                   | <del></del>       |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
| <del></del>   |                   |                   |                   | _        |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
| •   |                   | -                 |                   |          |          |
|   |                   |                   |                   |          |          |
| f an amendment provides for an exc  | hange reclassifie | ation or cancells | ntian of issued s | harac    |          |
| f an amendment provides for an exc<br>provisions for implementing the amo | endment if not co | ntained in the an | nendment itself:  | itai es, |          |
| (if not applicable, indicate N/A)   |                   |                   |                   | •        |          |
|   |                   |                   |                   |          |          |
|   |                   |                   | <del> </del>      |          | •        |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |
|   |                   |                   | <del></del>       |          |          |
|   |                   |                   |                   | ·        |          |
|   |                   |                   |                   |          |          |
|   |                   |                   |                   |          |          |

|  | NOVEMBER 5, 2018   |                           |
|--|--|---------------------------|
| The date of each amendment(s) date this document was signed.       | adoption:  | , if other than the       |
| Effective date if applicable:                                      |  |                           |
|  | (no more than 90 days after amendment file date)   |                           |
| Note: If the date inserted in thi document's effective date on the | s block does not meet the applicable statutory filing requirements, this date v<br>Department of State's records.                                  | vill not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |                           |
| ■ The amendment(s) was/were a by the shareholders was/were         | adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.  |                           |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |                           |
| "The number of votes ca  | st for the amendment(s) was/were sufficient for approval   |                           |
| by   | (voting group)   |                           |
|  | (voting group)   |                           |
| The amendment(s) was/were a action was not required.               | dopted by the board of directors without shareholder action and shareholder  |                           |
| ☐ The amendment(s) was/were a action was not required.             | dopted by the incorporators without shareholder action and shareholder   |                           |
| Dated  | BER 5, 2018  |                           |
| Signature  | director, president or other officer – if directors or officers have not been  |                           |
| tny a<br>selec   | ted, by an incorporator – if in the hands of a receiver, trustee, or other court   |                           |
| арро   | inted fiduciary by that fiduciary)   |                           |
|  | MEGAN NIMICK   |                           |
|  | (Typed or printed name of person signing)  | <del></del>               |
|  | PRESIDENT  |                           |
|  | (Title of person signing)  | <del></del>               |

. . . .

# BAKER, PAUL & DORMAN

A Partnership of Professional Associations www.bakerpaulanddorman.com

## LOREN M. PAUL, P.A

Laurie E. Baker, P.A., of Counsel

## LORI M. DORMAN, P.A.

Also licensed in Colorado

November 5, 2018

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Articles of Amendment

Dear Sir or Madam:

Please find enclosed the following Articles of Amendment to Articles for C & M Placement Services, Inc.

Also enclosed please find our client's check No.: 145 in the amount of \$35.00 representing the filing fee for the Amendment.

Kindly file these for record at your soonest convenience.

If you require anything further or need additional information in order to file these, please contact our office at your soonest.

Thank you

Very truly yours,

Lori M. Dorman, Esq.

Lori M. Dorman, P.A.

LMD:dld Enclosures