P150000 90045

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	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Wiggill Law, P.A.					
DOCUMENT NUMBER: P15000090045						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	Jayson J. Wiggill					
•		Name of Contact Persor	1			
	IW Law Firm, P.A. (Previous	sly Wiggill Law, P.A.)				
-		Firm/ Company	· · · · ·			
	14201 W. Sunrise Blvd., Ste.	104				
-		Address				
	Sunrise, FL 33323					
-		City/ State and Zip Code	2			
ijwioo	ill@gmail.com					
		sed for future annual report	notification)			
			,			
For further information	concerning this matter, pleas	se call:				
Jayson J. Wiggill		at (461-5809			
Name o	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment 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)			
Ame Divis P.O.	ing Address Indment Section Ission of Corporations Box 6327 Islander FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301			

Articles of Amendment Articles of Incorporation of

FILED

2019 FEB 19 PM 4: 10

Wiggill Law, P.A. (Name of Corporation as currently filed with the Florida Dept. of State)-P15000090045 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JW Law Firm, P.A. 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." 14201 W. Sunrise Blvd., Ste. 104 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Sunrise, FL 33323 C. Enter new mailing address, if applicable: 14201 W. Sunrise Blvd., Ste. 104 (Mailing address MAY BE A POST OFFICE BOX) Sunrise, FL 33323 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 (Florida street address) 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 Registered Agent, if changing

. 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		
		Sarry Sil		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		-		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add				
Remove				
5) 61				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	(Be specific)
N/A	
	
	
F. If an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

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)	
Note: If the date inserted in this block document's effective date on the Departmen	es not meet the applicable statutory filing requirements, to f State's records.	his date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes east for the amendator approval.	ment(s)
	y the shareholders through voting groups. The following stating group entitled to vote separately on the amendment(s)	
"The number of votes cast for the a	mendment(s) was/were sufficient for approval	
by	.,	
	(voting group)	
action was not required.	the board of directors without shareholder action and share the incorporators without shareholder action and sharehold	
action was not required.	the mean portion, without smalleriorder action and smalleriore	
2/14/2019 Dated		
Signature	uggill	
selected, by an	president or other officer – if directors or officers have not incorporator – if in the hands of a receiver, trustee, or othe clary by that fiduciary)	
Jayson .	J. Wiggill	
	(Typed or printed name of person signing)	
Preside	nt	
-	(Title of person signing)	