P16000056918

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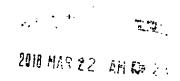
2018 HAR 22 AM EM 7 1

TO: Amendment Section Division of Corporations

NAME OF CORPOR		CONSULTING, INC.	
DOCUMENT NUME	P16000056918 BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Barb McBride		
•		Name of Contact Pers	son
	South Beach Tax & Financia	l Services	
•		Firm/ Company	
	1692 Penman Road		
•	•	Address	
	Jacksonville Beach, FL 3225	0	
,		City/ State and Zip Co	ode
tracey	fribourg@gmail.com		
	E-mail address: (to be us	sed for future annual repo	rt notification)
For further information	concerning this matter, pleas	se cull:	
Barb McBride		904 at (241-2533
Name o	of Contact Person	Area (Code & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida De	partment 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)
Mailing Address Amendment Section Division of Corporations		Ame Divis	et Address ndment Section sion of Corporations
	Box 6327 hassee, FL 32314		on Building Executive Center Circle
1 2112	いはららじじ、ドレ ライカモ4	2001	Executive Celler Circle

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



WHITE SOCKS CONSULTING, INC

(Name P16000056918	of Corporation as curren	atly filed with the Florida Dept. of State)
11000050710	(Dagumant Number	of Corporation (if known)
	(Document Number	of Corporation (it known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new not carried for YOU HOUSEKEEPING		The new
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
		N/A
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl	<u>icable:</u>	N/A
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	
D. If amending the registered agent ar	d/ar wasistanad affice ad	duess in Florida, anton the name of the
new registered agent and/or the nev		
Name of New Registered Agent	N/A	_
Hume of New Nexistered Agein		
	(Florida s	treel address)
	N/A	
New Registered Office Address:		(City) (Zip Code)
		(inj)
New Registered Agent's Signature, if c		
l hereby accept the appointment as regist	ered 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>0e</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
l) Change	N/A	_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change	-	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add	-	_		
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sha	g additional Articlesets, if necessary). (1	s, enter change(s Re specific)	ricic.		
/A	.13, ty necessury). (1	se specific)			
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<u>f an amendment pro</u>	vides for an exchang	e, reclassificatio	n, or cancellation	of issued shares	1
(if not applicable	menting the amendm	ient if not contai	ned in the amend	ment itself:	
(у погаррисаот	, indicate WA)				
•					
					_
			 -		

•	JANUARY 1, 2018	
The date of each amendment date this document was signed.	(s) adoption:	, if other than the
more of the state of the	JANUARY 1, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wern by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	c approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
	March 17, 2018	
Signature	Janos C. Fribering	
(By	a director, president or other officer – if directors or officers have not been	_
	ected, by an incorporator - if in the hands of a receiver, trustee, or other court	
ap	pointed fiduciary by that fiduciary)	
	TRACY C. FRIBOURG	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	<u> </u>