P16000101150

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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724 850-508-1891 (cell)

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ROSAL	YN R HARRIS, INC.		
DOCUMENT NUMBER: P160001011	50		
The enclosed Articles of Amendment and			
Please return all correspondence concerni	ng this matter to the following:		
PETER D RECCHIA			
	Name of Contact Person		
AWEALTH FINA	NCIAL GROUP, LLC		
	Firm/ Company		
745 MCCLINTOC	·		
***************************************	Address		
BURR RIDGE, IL	BURR RIDGE, IL 60527		
	City/ State and Zip Code		
precchia@4wealthfg.com	11		
E-mail addres	s: (to be used for future annual report notification)		
For further information concerning this matter, please call:			
PETER D RECCHIA	ut (<u>708</u>) <u>695-5845</u>		
Name of Contact Person	Arca Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee			
Mulling Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 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

ROSALYN R HARRIS, INC.	
(Name of Corporation	as currently filed with the Florida Dept. of State)
P16000101150	
(Docume)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corr	noration:
ROSALYN R HARRIS, P.A.	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the al	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	(ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered of	Tice address:
Name of New Registered Agent	<u> </u>
	(Florida street address)
	(Piprita) sire(a (tetress)
New Registered Office Address:	, Florida
	(city)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	tered Agent: am familiar with and accept the obligations of the position.
Signat	ture of New Registèred 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 De	<u>0e</u>	
X Remove	<u>v</u>	Mike Jo	nics	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check Onc)	Title		Name	Address
1) Change		P-M-sa		
Add				
Remove				
2) Change				
Add		_	The state of the s	7.00
Remove				-
3)Change		_	The state of the s	
Add				
Remove				
4) Change				
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
5) Change				
Add				
Remove				
6) Change		_		
Add				
Dumana				

E. If amending or adding additional Articles, enter change(s) bere: (Attach additional sheets, if necessary). (Be specific)
THE PROFESSIONAL ASSOCIATION SPECIFIC PURPOSE IS THE RENDERING OF
SERVICES WITH THE SALE OR LEASING OF REAL ESTATE.
P. 16
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) ad	pption:	, 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 bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	ited by the shareholders. The number of votes east for the amendme ficient for approval.	nt(s)
	oved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by		
·	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	ted by the board of directors without shareholder action and shareholder	lder
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and shareholder	
01/05/2017 Dated		
Signature	272	
(Bya Air selected	by an incorporator – if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary)	
:	PETER D RECCHIA	
•	(Typed or printed name of person signing)	
ı	NCORPORATOR	
-	(Title of person signing)	