Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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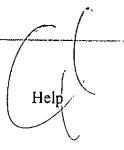
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COR AMND/RESTATE/CORRECT OR O/D RESIGN WEALTHTREE MGMT INC.

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Electronic Filing Menu

Corporate Filing Menu



TO: Amendment Section

To:

Fax: (850) 617-6380

COVER LETTER

Division of Co	rporations			
NAME OF CORPO	ORATION: WealthTree Mgm	t, Inc.		
DOCUMENT NUM	D13000036000			
	es of Amendment and fee are si	sharitand for filling	······································	
		J		
Please return all con	respondence concerning this ma	atter to the following:		
	Mark Hasner			
		Name of Contact Person	n	~•
	Therrel Baisden, LLP			023
	197011	Firm/ Company		DEC A
	I SE 3rd Avenue, Suite 2950			72.
	Address Miami, FL 33131			2023 DEC - 5 AM 11: 36
	City/ State and Zip Code			
		•	•	: 3
	mhasner@therrelbaisden.cor	n sed for future annual report		÷, 01
For firethan informati			iounion)	
To rather morning	on concerning this matter, plea	SE CRIT;		
Mark Hasner		at () 371-5758 de & Daytime Telephone Numbe	
Name	e of Contact Person	Area Co	de & Daytime Telephone Numbe	r
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment 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)	
Malling Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

To:

Articles of Amendment to Articles of Incorporation of

WealthTree Mgmt, Inc.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P17000035202	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
ASH MGMT INC.	TI.
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	231
(Principal office address MUST BE A STREET ADDRESS)	F CO
	in the second se
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	176 T.
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar v	<u>:</u> with and accept the obligations of the position.
Signature of New R.	egistered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (

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.

To:

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	PT 1	ohn Doe	
X Remove	<u>V</u> <u>N</u>	Mike Iones	
X Add	SY S	Cally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			Address 2023 DEC
Add			
Remove			
2) Change	 -		15 EE FL. 36
Add			36
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			****
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if nocessary). (Be specific)	
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	<u> </u>
	4
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)	
(y no. applicable, indicate 1971)	
	-

To:

The date of each amendment(s date this document was signed.) adoption:	if other than the
Ü		
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 di Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder acti	on and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	DZ3 DEC
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	当山下
by	<u> </u>	إنكالين
	(voting group)	SSEE, FL
12/5/202 Dated		36
Signature	ark Chiappara	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other couninted fiduciary by that fiduciary)	rt
	Mark Chiappara	
	(Typed or printed name of person signing)	······································
	President	
	(Title of person signing)	