P17000072010

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SECRETARY OF STATE

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T SCHROEDER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Please pricess this name change first.

NAME OF CORPORATION: MARSHWAGNED	R, INC.	<u> </u>	
DOCUMENT NUMBER: P17000072010			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
HEATHER MARSH			
	Name of Contact I	Person	
MARSHWAGNER, INC.	MARSHWAGNER, INC.		
	Firm/ Compar	ny	
1857 OSPREY BLUFF BLV	1857 OSPREY BLUFF BLVD		
	Address		
FLEMING ISLAND, FL 320	003		
	City/ State and Zip	Code	
HMARSH@MARSHWAGNER.C	OM		
E-mail address: (to be us		eport notification)	
3 man 444 to 50 d.	To raid the second of the seco	open neutron,	
For further information concerning this matter, pleas	se call:		
HEATHER MARSH	at (614	937-6009 ea Code & Daytime Telephone Number	
Name of Contact Person	Are	ea Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida	Department of State:	
S35 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certificate of Status	
Malling Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address mendment Section livision of Corporations lition Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Articles of Incorporation of MARSHWAGNER, INC.

(<u>Name o</u>	of Corporation as currently	y filed with the Florida Dept. of State)		
P17000072010				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this a	Florida Profit Corporation adopts the fo	ollowing amendr	nent(s) t
A. If amending name, enter the new na	me of the corporation:			
MARSHWAGNER OF FLORIDA INC			The ne	
name must be distinguishable and con "Corp" "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or "	Co". A professional corporation name	the abbreviation	on
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		NA		
C. Enter new mailing address, if applia (Mailing address MAY BE A POST of the Mailing address of the Post of the New Tegistered agent and the New Tegistered agen	OFFICE BON d/or registered office addr v registered office address		19 APR 12 AM II; SHORETAS YOF STA TALLAHASSEE, FLOR	FILED
Name of New Registered Agent	NA		H 09	
New Registered Office Address:	(Florida stra	eet address) Florida		
	- W-W	(Ciny)	(Zip Code)	٠
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			sition.	
·	Signature of New R	egistered Agent it 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.

X Change	PI	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			SE SE
2) Change	<u> </u>	<u> </u>	APR APR
Add			SSE N
Remove			
3) Change			
Add			10A
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) AMENDMENT TO CHANGE BUSINESS NAME FROM MARSHWAGNER, INC. TO		
MARSHWAGNER OF FLORIDA INC		_
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	APA AREA	T]
	12 SSEE	
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:	AMII Fic	ED
(if not applicable, indicate N/A)	AMII+ 09 OF STATE E. FLORIDA	
	· -	-
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The date of each amendment(s) a date this document was signed.	doption:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required. The amendment(s) was/were ad action was not required. APRIL 8, Dated Signature (By ac select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary) HEATHER MARSH	> m
	(Typed or printed name of person signing) CEO & PRESIDENT	
	(Title of person signing)	
	/	