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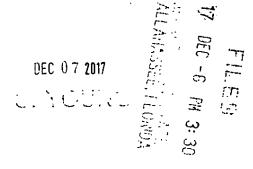
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WENDY STOFFE	ERS INC.	
DOCUMENT NUMB	D17000007801		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Wendy L Simpson		
•		Name of Contact Person	n
	Wendy Stoffers Inc		
•		Firm/ Company	
	3145 Cedar Bay Drive	, ,	
-	·	Address	
	Melbourne FL 32934		
		City/ State and Zip Cod	e
wendy	/lsimps@yahoo.com		
. —	. ~.	sed for future annual report	notification)
	·	•	,
For further information	concerning this matter, pleas	se call:	
Wendy L Simpson		at (_321	698-6656
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	navable to the Florida Dens	artment of State:
isherosed is a effect for	the following amount made	payable to the Florida Depe	arment 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)
<u>Mail</u>	ing Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations			on of Corporations
	Box 6327 hassee, FL 32314		Building Executive Center Circle
1 (11)161		#001 1	medanio come choic

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

Wendy Stoffers Inc

(Document Number of Co	rporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flo its Articles of Incorporation:	rida Profit Corporation adopts the fo	ollowing	amendment(s)
A. If amending name, enter the new name of the corporation:	4		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co word "chartered," "professional association," or the abbreviation "P.A	'. A professional corporation name"	the abi	breviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA		
-		ALLAND) jed 2.1
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the		-6 PH D
Name of New Registered Agent NAME Agent	· · · · · · · · · · · · · · · · · · ·	LOHUA	30 30
(Florida street o	address)		-
New Registered Office Address: (Cit	, Florida v)	(Zip Ca	ode)
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 po	sition.	

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Wendy L. Simpson	3145 Cedar Bay Deix
X Add		(Melbourn, FL
Remove			32934
2) Change		NA	
Add			
Remove		NA	
3) Change			<u></u>
Add			
Remove		NA	
4) Change			<u> </u>
Add			
Remove		NΑ	
5) Change			
Add			
Remove		, J. A.	
6) Change		NA	
Add			
Remove			

E. <u>If amending</u> (Attach <i>addita</i>	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)	
	N/H	
		· · · · · · · · · · · · · · · · · · ·
		
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		· · · · · · · · · · · · · · · · · · ·
If an amend	ment provides for an exchange, reclassification, or cancellat or implementing the amendment if not contained in the ame	ion of issued shares,
(if not a	pplicable, indicate N/A)	
	NIH	

The date of each amendment(s) ac	option:N	, if other than the
date this document was signed.	•10	
Effective date <u>if applicable</u> :	NA	
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cas fficient for approval.	: for the amendment(s)
	roved by the shareholders through voting groups. I each voting group entitled to vote separately on th	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	val
by	(voting group)	<u>_</u> ,"
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder	action and shareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder actio	n and shareholder
Dated	2-5-17	
Signature	2-5-17 Werdy Simpsm	<i>)</i>
	rector, president or other officer - it directors or of	
	i, by an incorporate— if in the hands of a receiver, ed fiduciary by that fiduciary)	trustee, or other court
	WENDY SIMPSON)
	(Typed or printed name of person signif	ng)
	Pailat	
	<u> </u>	
	(Title of person signing)	