P17000099437

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	÷#)
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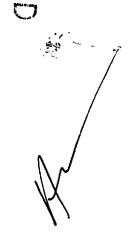


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SECRETARY OF STATE

HAR 0 6 2018 T. LEMMEUX



COVER LETTER

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TO: Amendment Section Division of Corporations

DOCUMENT NU	PORATION: Clark and Anderson		ment	Control of the Contro
DOCUMENT NO	MBER:		 .	
The enclosed Artic	eles of Amendment and fee are sub	omitted for fili	ng.	
Please return all co	orrespondence concerning this mat	ter to the follo	wing:	
	Laura Kelly Clark		· '	•
	·, 1 ·	Name of C	ontact Person	••
	Clark and Anderson Consultir	ng Company		
		Firm/ (Company	
	409 Bobwhite Drive			
		Ad	dress	
	Pensacola, Florida 32514			
		City/ State	and Zip Code	;
al	ork anderson consulting@amail.or			
——————————————————————————————————————	ark.anderson.consulting@gmail.co E-mail address: (to be us			
	12-man address. (to be us	eu for future a	illuai report	nouncation)
	otion nomeomina this metter aloos	a aalla		
For further informa	ation concerning this matter, pleas	e can:		
	ation concerning this matter, pleas		850	291-8102
Laura K. Clark			,850 Area Coo	291-8102
Laura K. Clark Nai	me of Contact Person	at		291-8102 de & Daytime Telephone Number
Laura K. Clark Nai		at		•
	me of Contact Person k for the following amount made p	at a payable to the \$\in\$43.75 Fi Certified	Florida Depa ling Fee & Copy Il copy is	•
Name of the Control o	me of Contact Person k for the following amount made p	at a payable to the \$\in\$43.75 Fi Certified (Additional)	Florida Depa ling Fee & Copy Il copy is	rtment of State: , \$\sumsymbol{\sum}\simsymbol{\sum}\sim}\sim\sim\sim\sim\sim\sim\sim\sim\sim\sim
Name of the Control o	me of Contact Person k for the following amount made p \$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status Mailing Address Amendment Section	at a payable to the \$\in\$43.75 Fi Certified (Additional)	Florida Depa ling Fee & Copy Il copy is Street Amend	rtment of State: , \$\sumsymbol{\sum}\simsymbol{\sum}\simsymbol{\sum}\simsymbol{\sim}\sim}\sim\sim\sim\sim\sim\sim\sim\sim\sim\sim
Naira K. Clark Naire Enclosed is a check \$35 Filing Fee	me of Contact Person k for the following amount made p \$43.75 Filing Fee & Certificate of Status Mailing Address	at a payable to the \$\in\$43.75 Fi Certified (Additional)	Florida Depa ling Fee & Copy Il copy is Street Amend Divisio	rtment of State: , \$\sumsymbol{\sum}\simsymbol{\sum}\simsymbol{\sum}\simsymbol{\sim}\sim}\sim\sim\sim\sim\sim\sim\sim\sim\sim\sim

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Clark and Anderson Consulting Company

The state of the s

(Name of Corporation	on as currently filed with the Florida Dept.	of State) 2018 HAR -5 P
P17000099437		
(Docum	nent Number of Corporation (if known)	SECRETARY OF S' TALLAHASSEE, FL
Pursuant to the provisions of section 607.1006, Floridats Articles of Incorporation:	a Statutes, this Florida Profit Corporation ad	opts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co". A professional corpora	
B. Enter new principal office address, if applicable	<u> </u>	
Principal office address <u>MUST BE A STREET ADD</u>		
	-	
	·	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	(X)	
 If amending the registered agent and/or register new registered agent and/or the new registered 		<u>e of the</u>
	OTHER BERLE CHAPT	
Name of New Registered Agent		
-	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:	
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations	of the position.
	otune of New Posintane I A I Colo	**************************************
Signe	ature 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)

TO THE RESIDENCE OF THE PARTY O

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	<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>	Address
1) Change	<u>v</u>	Amelia Anderson	409 Bobwhite Drive
Add			Pensacola, FL 32514
x Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		77. A 18. A	
Add Reniove			
Kemove			
6) Change			
Add			
Pemove			

	ding or adding additional additional sheets, if necessa	ry). (Be specific)			
-					
					
			-		
•					
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provisi (if	nendment provides for an ons for implementing the not applicable, indicate N	amendment if not o	ication, or cancella contained in the am	ntion of issued shares nendment itself:	<u>i.</u>
		<u> </u>			

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
Laura Clark	
by	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
2/28/2018	
Signature Laura Clark	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Lours Clark	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

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