P1800099710

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//Ŝtate/Zip/Phone #)	
· · PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name)	
(Doo	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to F	Filing Officer:	
Laill	rait	

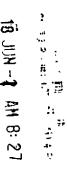
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DATE FOR COLUMN



COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: CHAdwick & Davidson Cosp.
DOCUMENT NUMBER: P18000009710 / Date filed 1/30/2018
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kari Williams Name of Contract Person CHadwick & Davidson Corp. Firm/ Company 3861 Nw134th Quence Address Coral Springs Florida 33065 Carl State and Zip Code Kari Ochadwickdavidson. Com.
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Name of Contact Person at (954) 224-7626 Area 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 Certified Copy (Additional copy is cnclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is cnclosed)
Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to

Articles of Incorporation

2.1	01	-	0	2-1.00	
CHAdwick and (Name of Corport	DQUID as currently	filed with the	Florida Dept. o	1 State)	
Planco	09710				
(Doc	ument Number of	Corporation (if	known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this F	lorida Profa (Corporation adop	its the following amend	lment(s) to
A. If amending name, enter the new name of the	corporation:				
CHANWICK & Day	ridson	Copp		The	
name must he distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "C	o". A profes	" or "Incorpora sional vorporation	ted" ar the abbrevia on name must contain	tion the
B. Enter new principal office address, if applica	ble:			40 6	_
(Principal office address MUST BE A STREET A	DDRESS)				_77
					=
					_m
C. Enter new mailing address, if applicable: (Mailing address MAX BE A POST OFFICE)	B <i>OX</i>)		<u> </u>	·	- _/
				ين ا	j 3
				•	
D. If amending the registered agent and/or regis		es in Florida,	enter the name	of the	
new registered agent and/or the new register	ed office address:				
Name of New Registered Agent		<u> </u>	······································		
	(Florida stre	et address)			
New Registered Office Address:			, F	lorida	_
	ſ	City)		(Zip Code)	
					•
New Registered Agent's Signature, if changing F					
I hereby accept the appointment as registered agen	L I am familiar w	ith and accept	the obligations of	of the position.	
				<u> </u>	
Si	ignature of New Re	gistered Agen	, 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: XChange	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1)Change			.	_	
Add					
Remove					
2) Change					
Add		_			
Remove					
3) Change					
Add					 -
Remove					
4) Change					
Add		-		<u>-</u>	
Remove					
5) Change					
Add					
Remove					<u>, </u>
6) Change					
Add					<u> </u>
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
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	<u></u>				
		 			
					<u></u>
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		 .			
f an amendment provides for an exch	ange, reclassificat	ion, or cancellat	ion of issued sha	ires,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not cont	ained in the amo	endment itself:		
(y noi appliculat, indicate (1921)					
					<u>-</u>
			<u> </u>	. =-	-

The date of each amendment(s) adoption:	03-06-2078	, if other than the
date this document was signed.		
Effective date if applicable:	03-06-2018 (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of S	ot meet the applicable statutory filing requirements, this c State's records.	date will not be listed as the
Adoption of Amendment(s) (CHI	ECK ONE)	
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	chareholders. The number of votes cast for the amendment pproval.	r(s)
	shareholders through voting groups. The following staten group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amend	dment(s) was/were sufficient for approval	
by	."	
(voti	ng group)	
☐ The amendment(s) was/were adopted by the baction was not required.	poard of directors without shareholder action and sharehold	der
The amendment(s) was/were adopted by the is action was not required.	ncorporators without shareholder action and shareholder	
Dated 5-20'- 2018	<i>,</i>	
	gent or other officer – it directors or officers have not beer reporator – if in the hands of a receiver, trustee, or other cou	
	Typed or printed name of person signing)	
	GESIDENT	
	(Title of person signing)	