PROCEULONY

(Requestor's Name)		
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PICK-UP WAIT MAIL		
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SECRITARIO (FINALI
ALLAHASSEE, FLORID

COVER LETTER

NAME OF CORPORATION:

WALDO - G CORPORATION

DOCUMENT NUMBER:

Please return all correspondence concerning this matter to the following:

LEON GORDON

Name of Contact Person

Firm/ Company

Address

Address

City/ State and Zip Code

| Waldon @ Value of Contact Person + ranks condition of the following of the f

For further information concerning this matter, please call:

TO: Amendment Section

Leon Gordon at (\$57, 753-1881)
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

V

☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

WALDO- & CORPORATION

(Name of Corporation as currently f	ited with the Florida Dant, of State)
	0014
(Document Number of C	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fla its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.,	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18 AUG
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	, Florida
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit.	h and accept the obligations of the position.
Signature of New Reg	istered 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)

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	PT John Doe	
\underline{X} Remove	<u>V</u> <u>Mike Jones</u>	
X Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	Title Name	Address
1) Change	VP Trecia L Brown	6549 Diamond Spn
Add Remove	VP Trecea L Gordon	Terrace # 2005 West Palm Beach & 33411
2) Change Add	VP Trecea L Gordon	Springs Terrace # 2005
Remove		West Palmbeach F 334
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
	-	
1/1		
- · · · ·		
f an amendment provides for an excl	ange, reclassification, or cancellation of issue	vd charec
provisions for implementing the ame (if not applicable, indicate N/A)	dment if not contained in the amendment it	self:
у ногаррисионе, таксие (мл.)		
***		<u> </u>
·		
		,

'he date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
ffective 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 da locument's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
·	
Signature (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 cour	
appointed fiduciary by that fiduciary)	
Leon Gordon	
(Typed or printed name of person signing)	
tresident	
(Title of person signing)	

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