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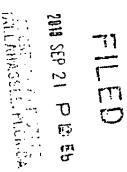
	 	
(Re	equestor's Name)	
(Ad	ldress)	
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(C)	e (Chaha (Zia iOhaa	- #\
(Ci	ty/State/Zip/Phon	le #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Na	me)
(Do	ocument Number)
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COVER LETTER

ΓO: Amendment Section Division of Corporations

NAME OF CORPORAT	MON: WM Consult	ing Secures, inc.
	i: <u>P1800007</u> 0	
The enclosed strticles of a	Amendment and fee are sul	omitted for filing.
Tease return all correspor	ndence concerning this mat	ter to the following:
	wilso	Name of Contact Person
	WM Co	Firm Company
		Firm' Company
	69	32 Bay Drive
		Address
	F1.0	City/ State and Zip Code
		City/ State and Zip Code
	١	
	Famail address: to be us	ed for future annual report notification)
	· / / / / / / / / / / / / / / / / / / /	,
For further information co	oncerning this matter, pleas	e call:
1111/500	Maima	786 719 - 4341
Name of (Contact Person	at (786) 719 - 4341 Area Code & Daytime Telephone Number
linclosed is a check for th	ne following amount made [payable to the Florida Department of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
	<u>e Address</u> ment Section	Street Address Amendment Section

Articles of Amendment to Articles of Incorporation of

of	
WM (cosulting Securces , INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P 18000076080	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Frits Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) t
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	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Uniter 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) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: 	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	(address)
New Registered Office Address:	Tity) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar wis Signature of New Registered Signature of New Registered Agent:	th and accept the obligations of the position.

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, CEO—Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office hold 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	PT John	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	MUR	Hanid Zuniga	6932 Bay Dive
\mathbf{X}_{\perp} Add			Micmi Beach PC 344)
Remove			
2) Change	<u> </u>	W. Ison Molina Digz	6932 Bay Dive
Add			Miani Bouch, FC. 33141
Remove			
3.1 Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>lf amending or adding add</u> Attach <i>additional sheets, if r</i>	necessary). (Be	specific)			
				·	
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·				-	
					
					
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**-	-				
 	- 		_ .		
					
lf an amendment provides	for an exchange.	, recla <u>ssificatio</u>	n, or cancellatio	n of issued shares	1
provisions for implementi	ing the amendme	<u>nt if not contai</u>	ned in the amen	dment itself:	
(i) not applicable, indi	cate N A)				
			<u> </u>	<u>.</u>	
					-, ·
					<u>-</u> -

The date of each amendment(s) adoption:date this document was signed.	8/10/18	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 block does not document's effective date on the Department of St		nents, this date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app		amendment(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting gr		
"The number of votes cast for the amenda	nent(s) was/were sufficient for approval	
by	g group)	
(votin	g group)	
☐ The amendment(s) was/were adopted by the boaction was not required.	ard of directors without shareholder action a	nd shareholder
The amendment(s) was/were adopted by the in- action was not required.	corporators without shareholder action and s	hareholder
Dated8 16 18		
Signature	ent or other officer – if directors or officers h	
(By a director, presiding selected, by an incorpanied fiduciary between the control of the contr	porator – if in the hands of a receiver, trustee	, or other court
	Wilson Molina Diaz	
(T	yped or printed name of person signing)	
	President	
	(Title of person signing)	 -