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January 11, 2023

Via US First Class Mail

Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Re: Wehrle Consulting, Inc.

To Whom It May Concern.

Please accept this letter as our request to file the following enclosed documents:

1) Articles of Amendment for Wehrle Consulting, Inc. (2 copies).

I have enclosed Check Number 13458, in the amount of \$35.00, made payable to the Florida Department of State, to cover the filing fees associated therewith. Upon receipt, please file the enclosed document as soon as possible. Then, please return a date stamped copy of the enclosed Articles of Amendment to me in the self-addressed, stamped envelope provided, to provide evidence that the document has been filed.

Thank you for your attention to this matter and please do not hesitate to contact me directly at 801-527-1040 should you have any questions or if you should require any further documentation in order to process the enclosed filing.

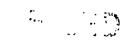
Very truly yours:

Shelbie Larsen

Paralegal to Spencer J. Witt, Esq.

SW/sjl Enclosures

Articles of Amendment to Articles of Incorporation of



Wehrle Consulting, Inc.	
(Name of Corporation	as currently filed with the Florida Dept. of State) 2023 JAN 17 AM 7: 2
P19000039197	as currently thea with the Photos szept, of State)
	· · · · · · · · · · · · · · · · · · ·
(Document	it Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered." "professional association," or the ubbrevia	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word atton "P.A."
D. F-A vincial office address if antically	12809 SW Eleanor Drive
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS) Port St Lucie, Florida 34987
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12809 SW Eleanor Drive
(maining mainess MAT DE A TOST OF THE DOA)	Port St Lucie, Florida 34987
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent 12809 SW Elea	anor Drive
	(klomán strápi nádledse)
Port St Lucie	(Florida street address) 34987
Port St Lucie New Registered Office Address:	34987, Florida

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc, 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	Title	<u>Name</u>	<u>Addres</u> s
(Check One)	PVST	Amber Wehrle	12809 SW Eleanor Drive
1) Change			Port St Lucie, Florida 34987
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			<u> </u>
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
_			**************************************
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) addate this document was signed.	loption:	, 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 b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amen fficient for approval.	dment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendments:	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
Dated / - 4	7-23	
Signature	1-23 2/dl	
(By a di	rector, president or other officer – if directors or officers have no	
	, by an incorporator – if in the hands of a receiver, trustee, or othed fiduciary by that fiduciary)	er court
	Amber Wehrle	
•	(Typed or printed name of person signing)	
!	President	
	(Title of person signing)	