P190000 74841

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WALLCE & CO S	ERVICES INC	
DOCUMENT NUMB	ER: P19000074841		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	DAVID G WALLACE JR		
•		Name of Contact Person	1
	WALLACE & CO SERVICES INC		
		Firm/ Company	
	7615 CHASE ROAD		
		Address	
	LAKELAND, FL 33810		
		City/ State and Zip Code	
For further information	n concerning this matter, pleas		
		at (de & Daytime Telephone Number
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O	ling Address endment Section sion of Corporations . Box 6327 ahassee, FL 32314	Amenc Divisio Clifton	Address iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

WALLACE & CO SERVICES INC

(Name of Corporation as	currently filed with the Florida Dept. of State)
P19000074841	
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	utio <u>n:</u>
	The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp." "In word "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation ic," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u> </u>
	•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Maning address MAT BE A FOST OFFICE BOX)	I -
	<u></u>
D. If amending the registered agent and/or registered of	ffice address in Florida, enter the name of the
new registered agent and/or the new registered office	e address:
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:
I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
Signatura	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)

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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	LARRY R WALLACE	7615 CHASE ROAD
X Add			LAKELAND, FL 33810
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
-			
6) Change			11
Add			
Remove			

f amending or adding additional Art Much additional sheets, if necessary).	(Be specific)				
		10 7.11			
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<u> </u>		<u> </u>			
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f an amendment provides for an exc	change, reclassifica	tion, or cancellat	ion of issued sh	ares,	
provisions for implementing the am	endment if not con	tained in the am	endment itself:		
(if not applicable, indicate N/A)					
		<u> </u>			
			·	. .	

	11/01/19	if other than the
The date of each amendment(s) adoption this document was signed.	tion:	If Other than un
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fue date)	
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, rtment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amen cient for approval.	dment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	yed by the shareholders through voting groups. The following ch voting group entitled to vote separately on the amendment	statement (s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and sha	areholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareho	older
11/01/19		
Dated		
Signatury /	to allace	
(By a dire	retor, president or other officer - if directors or officers have n	ot been
	by an incorporator – if in the hands of a receiver, trustee, or of	her court
арроінтес	I fiduciary by that fiduciary)	
12	AVID G WALLACE JR	
_	(Typed or printed name of person signing)	
P	RESIDENT	
-	(Title of person signing)	