

P22 000026444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

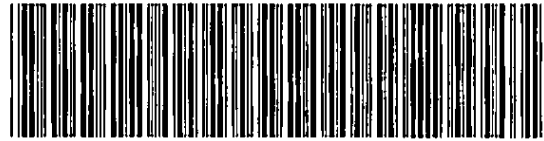
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JUL 20 PM 2:21
JUL 20 2022
JUL 20 2022

OCT 18 2022

J. PRATHER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Lorna Wellington PA
DOCUMENT NUMBER: P 2 2 0000 26444

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lorna McKeith-Wellington
Name of Contact Person
Lorna Wellington PA
Firm/ Company
909 Lake Shore Drive.
Address
Delray BEACH, FL, 33444
City/ State and Zip Code
lornewellington@icloud.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lorna Wellington at 561, 699 8019
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:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

NAME MUST CHANGE TO
LORNA MCKEITH-WELLINGTON PA

Articles of Amendment
to
Articles of Incorporation
of

Lorna Wellington PA

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Lorna McKeith - Wellington PA

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

N/A

Signature of New Registered Agent, if changing

Check if applicable

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

N/A

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

* MISSED OFF "McKeith" my name is double
barrelled

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 7/13/2022, if other than the date this document was signed.

Effective 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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)

Dated 7-13-2022

Signature L. Sullivan

(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 court appointed fiduciary by that fiduciary)

LORNA McVEITH-WELLINGTON
(Typed or printed name of person signing)

MANAGER
(Title of person signing)

2022 JUL 20 PM 2:21
FILED

State of Florida



Department of State

McKeith-

I certify from the records of this office that LORNA WELLINGTON PA is a corporation organized under the laws of the State of Florida, filed on April 6, 2022, effective April 6, 2022.

The document number of this corporation is P22000026444.

I further certify that said corporation has paid all fees due this office through December 31, 2022, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code, 022A00008082-040722-P22000026444-1/1, noted below.

Authentication Code: 022A00008082-040722-P22000026444-1/1

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
Seventh day of April, 2022



Randy R. Bue
Secretary of State

20:38

< All Inboxes MCKEITH...

^ v

do not reply to the sender's email address.



Ron DeSantis, Governor
Melanie S. Griffin, Secretary

July 11, 2022

Lorna Wellington
909 Lake Shore Drive
Delray Beach, FL 33444

RE: Florida Real Estate Commission
Application Number: 6760907, Profession 2501

Dear Lorna Wellington

The Department of Business and Professional Regulation has received your application for licensure as a Real Estate Broker or Sales. The application you have submitted is not complete and we will need the additional documentation listed below. Please wait until you have collected all the required documents before submission. Once we receive the additional documentation along with a copy of this letter, your application will be re-evaluated.

Application Deficiencies:

Due to lack of proper registration with the Florida Department of State, Division of Corporations, your application has been deferred. To use the PA/LLC designation in the real estate profession as an individual, you must register your legal first and last name with one of the following suffixes: PA, LLC, PL, or PLLC. Your middle name or initial is optional. Once you have updated the registration at www.sunbiz.org, resubmit your request. You may also contact them by phone at 850.245.6000. Nicknames, abbreviations, or any other name that is not your legal name is not acceptable nor should your name be registered as a fictitious name.

Note: Our records indicate that your legal name as on file is Lorna Bernice McKeith Wellington

PA

Once we have received this information, we will complete our review of your application. Please note that your application will remain in an incomplete status until such time you have submitted all the requested information for review.

Please do not reply to this email. This email is sent from an unmonitored email address.
To submit the requested documentation use one of the following options:

Responding to Deficiency Notification:

You may respond to your deficiency using the following methods:

Online Submission: If you submitted your application online, visit www.MyFloridaLicense.com and log in to your DBPR online services account. Select Application Status Inquiry from the Functions Menu and then select the relevant application. Select attach and use the browse function to find responsive documents on your computer. A confirmation email will be sent once attachment(s) have been uploaded to your application.



Florida

DRIVER LICENSE

FLA M234-522-70-676-0



WILLIAM J. WELLS
2109A BERNICE DR
DELRAY BEACH FL 33444
DOB 05/16/1970 SEX M
EYES BRN HAIR BRN HT 5-03
WEIGHT 160 LBS
1) BEST NONE 2) END NONE
3) END NONE
SAFE DRIVER
EXPIRATION DATE 08/08/2018
CLASS 100 442201444444
REPLACED 01/04/2021
Operation of a motor vehicle constitutes
agreement to any restrictions required by law

