## P22000054979

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	ON: WELLINGTON M	IANANGEMENT CORPC	RATION		
DOCUMENT NUMBER:	P22000054979				
The enclosed Articles of Am	nendment and fee are sul	bmitted for filing.			
Please return all corresponde	ence concerning this mat	tter to the following:			
Denn	is Ardi, Esq.				
		Name of Contact Person	1		
<del></del>	Firm/ Company				
9595	9595 Wilshire Boulevard, Suite 210				
	Address				
Beverly Hills, CA 90212					
	City/ State and Zip Code				
DA@	DA@DennisArdi.com				
E	E-mail address: (to be us	ed for future annual report	notification)		
For further information conc	erning this matter, pleas	se call:			
Dennis Ardi	in I	at (310	271-6900		
Name of Con	tact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee □	S43.75 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)		
P.O. Box 6	nt Section f Corporations	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

## WELLINGTON MANAGEMENT CORPORATION

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( <u>Name (</u>	of Corporation as curren	tly filed with the Florida De	ept. of State)
	P2200	0054979	TALLAHASSACT
-	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation	d" or the abbreviation "Corp.," name_must_contain_the_word
B. Enter new principal office address.	B. Enter new principal office address, if applicable:		LVD
(Principal office address MUST BE A STREET ADDRESS)		SUITE 519	
		WELLINGTON, FL 33	441
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9314 FOREST HILLS BLVD	
· · · · · ·		SUITE 519	
		WELLINGTON, FL 33441	
D. If amending the registered agent ar new registered agent and/or the new			name of the
Name of New Registered Agent	N/A		
	(Florida s	street address)	<del></del>
New Registered Office Address:	N/A		, Florida N/A
		(City)	(Zip Code)
New Registered Agent's Signature, if c	honging Desirtared Ages		
I hereby accept the appointment as regist			ions of the position.
	Signature of New	Registered Agent, if changin	
			-
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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John</u>	<u> Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
T) Change	DCFO	Dennis Ardi	9595 Wilshire Boulevard
Add			Suite 210
Remove			Beverly Hills, CA 90212
2) Change	DPCEO	Karen Ford	9595 Wilshire Boulevard
X Add			Suite 210
Remove 3) Change			Beverly Hills, CA 90212
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

/A	additional sheets, if necessary,	i. (Be specific)		
		<del> </del>	<del> </del>	
			<u>.</u>	
<del></del>				
	mendment provides for an ex	change, reclassification,	or cancellation of issued	shares,
lf an ai	sions for implementing the an	nendment if not containe	d in the amendment itse	<u>lf:</u>
provis	t ant annicable indicate N/A\			
provis (ij	f not applicable, indicate N/A)			
provis (ij	η ποι αργατιώνες παιτίαε (1911)			
provis (ij	у та црунсиже, такше 1921у			
provis (ij				
provis (ij	у та аррисаме, такше та			
provis (ij	у ти аррисаме, такше ти			
provis (ij	у ти црупсионе, такие голу			
provis (ij	у ти арупсияс, такше голу			
provis (ij	у ти аррисияс, такие голу			
provis (ij	у ти аррисияс, такие голу			
provis (ij	у ти аррисияс, такие голу			
provis	у ти аррисионе, таксите голу			

The date of each amendment(s) ado	ption:	_, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : N/A		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	red by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
Dated July 13.202  Signature (By a dire selected, appointed)	r the amendment(s) was/were sufficient for approval  (voting group)  (voting group)	2022 AUG 15 PH 1: 08
_	(Typed or printed name of person signing)	
D	irector	
<u>-</u>	(Title of person signing)	<del></del>