## P2400000X14S

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2024 AUG 22 PM 1: 47 SECRETARY OF STATE TALLAHASSEE, FL

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Wind Mitigation E	Experts Inc.		
	BER: P24000002145			
	s of Amendment and fee are st	abmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	Scott Joellenbeck			
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	ก	<del></del>
	Accounting Plus			
		Firm/ Company	, , <u>, , , , , , , , , , , , , , , , , </u>	
	600 Rogue Dr			
		Address	·	
	Longwood, FL 32779			
		City/ State and Zip Cod	c	<del></del>
	acctplus9844@gmail.com			
	= =	sed for future annual report	notification)	
For further informatio	on concerning this matter, pleas	se call:		
Scott Joellenbeck		at (352	577-9844 de & Daytime Telephone Num	2024 AUG 22 SECRETATIVA TANLLAHA
Name	of Contact Person	Area Co	de & Daytime Telephone Num	iber English
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	artment of State:	ANG 22 PH I
■ \$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)	2024 AUG 22 PH 1: 47 SECRETATION OF STATE TALLAHASSEE, FL
Amo Divi	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Wind Mitigation Experts Inc.			
(Name of Corporat	tion as currently filed with the Flo	rida Dept. of State)	
P24000002145			
(Docu	ument Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this Florida Profit Corp.	oration adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the o	corporation:		
			The new
name must be distinguishable and contain the word "e"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abbi	;" or "Co". A professional corp	rporated" or the abbrev oration name must co	viation "Corp.,"
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD			
	<del>-</del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u>OX</u> )		
D. If amending the registered agent and/or registered new registered agent and/or the new registered		er the name of the	SECKETARY OF STATE TALLAHASSEE, FL
Name of New Registered Agent			- 12 - 12 - 13 - 14 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 - 15
			800 R
	(Florida street address)		Es :
New Registered Office Address:		, Florida	<u> </u>
	(City)	(	Zip Code) <sup>FT</sup>
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		obligations of the positi	on.
Sign	nature of New Registered Agent, if ci	hanging	
n		£* .	

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)

Remove

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 Doe		
X Remove	<u>v</u>	Mike Jones		
$\underline{X}$ Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	VP	Erika Eiland	1180 Berkman Circle	
X Add			Sanford, FL 32771	
Remove				
2) Change	-			
Add				
Remove Change				
Add				
Remove			<del></del>	
4) Change	<del></del>		TEC TO THE TECHNISH THE TECHNIS	
Add			2	•"
Remove			2 PH	ï
5) Change			THE STATE OF THE S	· .
Add			FL	
Remove				
6) Change				
Add			<del> </del>	

Attach additional sheets, if necessary). (Be specific)		
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		. 7
(if not applicable, indicate N/A)	SEOI TA	, 9024 AI
		P.
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	LLAHASSEE, FL	1
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The date of each amendment(s	) adoption:	, if other than the
date this document was signed.	August 16, 2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by Ryan Eiland	(voting group)	
August Dated	16, 2024	
Signature	Ran Eilens	
(By sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	- <del></del>
	Ryan Eiland	
	(Typed or printed name of person signing)	SECRE TAILL
	President	Aug. 1-1
	(Title of person signing)	P2 PN 1: 47 ARY OF STATE HASSEE, FL

• • •