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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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Amend 12.2.14

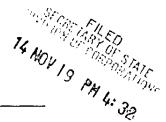
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LITTLE & WILLIAMS, INC.					
DOCUMENT NUMBER: P95000047185					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
WINSTON WESLEY WILLIAMS					
Name of Contact Person					
Firm/ Company					
3626 Cypress Street					
Address					
Jacksonville, FL 32205 City/ State and Zip Code					
·					
WES32205@yahoo.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
WINSTON WESLEY WILLIAMS at (904) 994-2323					
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:					
■ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



LITTLE & WILLIAMS, INC.

(Name of Corporation as o	currently filed with the Flo	rida Dept. of State)		٠٠٠ ٠
P95000047185				_
(Document	Number of Corporation (if I	known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following	g amendment(s) t
A. If amending name, enter the new nan	ne of the corporation:			
N/A				The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	tion "Corp," "Inc," or "C	o". A professional corpora		
B. Enter new principal office address, if (Principal office address <u>MUST BE A ST</u>		N/A		
C. Enter new mailing address, if application (Mailing address MAY BE A POST O		N/A		
D. If amending the registered agent and new registered agent and/or the new		ss in Florida, enter the nam	e of the	
	N/A			
-	(Florida stree	t address)		
New Registered Office Address:	(City)	, Florida_	(Zip Code)	-
	(0.19)		(mile seaso)	
New Registered Agent's Signature, if cha			<i>a.</i>	

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

Signature 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	JOSEPH E. WILLIAMS	319 SW Solstice Court
Add			Lake City, FL 32024
Remove			
2) Change	V	Joseph Emerson Williams	319 SW Solstice Court
Add		Trustee of the Joseph Emerson Williams Revocable	Lake City, FL 32024
Remove		Trust utd November 7, 2014	
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) N/A .	
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"	
If an amendment provides for an exchange, reclassification, or cancellation of issued	shares,
provisions for implementing the amendment if not contained in the amendment itsel (if not applicable, indicate N/A)	<u>!;</u>
N/A	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated November 7, 2014	
Signature (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)	
JOSEPH EMERSON WILLIAMS	
(Typed or printed name of person signing)	_
VICE PRESIDENT	

(Title of person signing)