P96000054336

| (Address) | | | | |
|-----------------------------------------|--|--|--|--|
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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INISICA OF CORPORATIONS

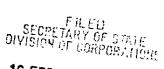
FEB 17 20th

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Jinks & Moody, P.A. | | | | | |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| DOCUMENT NUMBER: P96000054336 | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Jack G. Williams | | | | | |
| | Name of Contact Person | | | | |
| Jack G. Williams, Attorney at | Jack G. Williams, Attorney at Law | | | | |
| | Firm/ Company | | | | |
| Post Office Box 2176 | | | | | |
| Address | | | | | |
| Panama City, FL 32402 | | | | | |
| | City/ State and Zip Code | | | | |
| Russell.Jinks@warrenaverett.com | | | | | |
| _ | ed for future annual report notification) | | | | |
| 2 11111 2441 255. (10 00 450 | a to ratar annual toport normounon) | | | | |
| For further information concerning this matter, please | e call: | | | | |
| Jack G. Williams | at (850) 763-5368 | | | | |
| 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 \$\sum \text{\subset}\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$ | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | |

Articles of Amendment to Articles of Incorporation of



16 FEB 16 AM 8: 08

| urrently filed with the Florida Dept. of State) |
|---------------------------------------------------------------------------------------------------------------------------------------|
| |
| mber of Corporation (if known) |
| es, this Florida Profit Corporation adopts the following amendment(s) to |
| ion: |
| The new |
| poration," "company," or "incorporated" or the abbreviation," or "Co". A professional corporation name must contain the iation "P.A." |
|) |
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| |
| ce address in Florida, enter the name of the |
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| |
| rida street address) |
| orida street address), Florida |
| |

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 | PT | John Doe | |
|-------------------------------|--------------|-------------|-----------------|
| X Remove | <u>v</u> | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | • | |
| 2) Change | | | |
| Add | | | |
| Remove | | | <u> </u> |
| | | | |
| 3) Change | | | - |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| , Add | | | |
| Remove | | | |
| | | | |
| 5) Change | | - | |
| Add | | | |
| Remove | | | |
| | | | |
| δ) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | cles, enter change(s) here: (Be specific) |
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| f an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amen (if not applicable, indicate N/A) | dment if not contained in the amendment itself: |
| | |
| · · · · · · · · · · · · · · · · · · · | |
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| | February 10, 2016 | F# + [] |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| The date of each amendment(s date this document was signed. | adoption: | FILLU SECRETARY, OF other, than the DIVISION OF CORPERATION! |
| Effective date if applicable: | (no more than 90 days after amena | 10 CED LC AM R- DR |
| Note: If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filir Department of State's records. | ng requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes c sufficient for approval. | east for the amendment(s) |
| ☐ The amendment(s) was/were must be separately provided | approved by the shareholders through voting groups for each voting group entitled to vote separately on | . The following statement the amendment(s): |
| "The number of votes of | ast for the amendment(s) was/were sufficient for app | proval |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were action was not required. | adopted by the board of directors without shareholds | er action and shareholder |
| ☐ The amendment(s) was/were action was not required. | adopted by the incorporators without shareholder ac | tion and shareholder |
| Februar Dated Signature | Peurel h. John | |
| (By sele | a director, president or other office - if directors or cted, by an incorporator - if in the hands of a receive ointed fiduciary by that fiduciary) | |
| | Russell M. Jinks | |
| | (Typed or printed name of person sign | ning) |
| | President | |
| | (Title of person signing) | |