

100214350931

(Requestor's Name)

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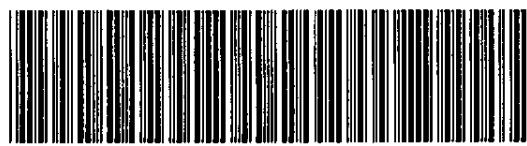
(Business Entity Name)

(Document Number)

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11/28/11--01041--025 \*\*43.75

Amend

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11 NOV 28 AM 11:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** DeBoest, Stockman, Decker, Hagan, Cheffer & Webb-Martin, P.A.

**DOCUMENT NUMBER:** P97000020581

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

Please return all correspondence concerning this matter to the following:

James G. Decker

Name of Contact Person

DeBoest, Stockman, Decker, Hagan, Cheffer & Webb-Martin, P.A.

Firm/ Company

1415 Hendry Street

Address

Fort Myers, Florida 33901

City/ State and Zip Code

kguffey@dsdhlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James G. Decker

Name of Contact Person

at ( 239 ) 334-1381

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$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)

**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

DeBoest, Stockman, Decker, Hagan, Cheffer & Webb-Martin, P.A.

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

P97000020581

(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:**

*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**)*

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TALLAHASSEE FLORIDA

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**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:* \_\_\_\_\_

*(Florida street address)* \_\_\_\_\_

*New Registered Office Address:* \_\_\_\_\_, Florida \_\_\_\_\_  
(City) \_\_\_\_\_ (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.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

**If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.**

*(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)*

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>PD</u>	<u>William E. Stockman</u>	<u>1415 Hendry Street</u> <u>Fort Myers, Florida 33901</u>
2) <u>SD</u>	<u>James G. Decker</u>	<u>1415 Hendry Street</u> <u>Fort Myers, Florida 33901</u>
3) <u>TD</u>	<u>Samuel J. Hagan, IV</u>	<u>1415 Hendry Street</u> <u>Fort Myers, Florida 33901</u>
4) <u>VPD</u>	<u>M. Brian Cheffer</u>	<u>1415 Hendry Street</u> <u>Fort Myers, Florida 33901</u>
5) <u>VPD</u>	<u>Jayne Webb-Martin</u>	<u>1415 Hendry Street</u> <u>Fort Myers, Florida 33901</u>
6) _____	_____	_____
_____	_____	_____
_____	_____	_____

**If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:**

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

**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)

The date of each amendment(s) adoption: 11-22-11

**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)

- 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 22, 2011

**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)

William E. Stockman

(Typed or printed name of person signing)

President/Director

(Title of person signing)