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COVER_LETTER

Division of Corporations NAME OF CORPORATION: ___ DeBoest, Stockman, Decker, Hagan, Cheffer & Webb-Martin, P.A. P97000020581 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William E. Stockman Name of Contact Person DeBoest, Stockman, Decker, Hagan, Cheffer & Webb-Martin, P.A. Firm/ Company P.O. Box 1470 Address Fort Myers, FL 33902 City/ State and Zip Code kguffev@dsdhlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239) 334-1381 Area Code & Daytime Telephone Number William E. Stockman Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

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 curren	tly filed with the Florida Dept. of S	tate)		
P97000020581				
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, thinks Articles of Incorporation:	s Florida Profit Corporation adopts	he followin	g amendn	nent(:
A. If amending name, enter the new name of the corporation:				
Stockman, Cheffer, Hagan & Webb-Martin, P.A.			The ne	.'\1°
name must be distinguishable and contain the word "corporate "Corp., ""Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation i			on
B. Enter new principal office address, if applicable:	2120 McGregor Blvd.			
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, Florida 33901			
		-		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 1470			· 13
(maining dadress MAT DE ATOST OFFICE DOM	Fort Myers, Florida 33902		83	 -1
				٠. ١
				-
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		<u>ihe</u>	(1) (1)	
	33.			
Name of New Registered Agent			-	
(Florida	street address)		-	
New Registered Office Address:	(City)		Code)	
	•	·		
	((ii _y)	rzip ((ode)	
New Registered Agent's Signature, if changing Registered Agen				
I hereby accept the appointment as registered agent.—I am familia.	r with and accept the obligations of th	e position.		
Signature of Nove	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.

Example: XChange	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sm	<u>iith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
1) Channe				
4) Change		_		
Add Remove				
Kemove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
D				

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)	If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
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provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
	provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
		<u> </u>
		-

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
•		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
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selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	William E. Stockman	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	