P9800084663

uestor's Name)	
ress)	
ress)	
/State/Zip/Phone	= #)
☐ WAIT	MAIL
iness Entity Nan	ne)
ument Number)	
Certificates	s of Status
iling Officer:	
	ress) /State/Zip/Phone WAIT iness Entity Nar ument Number)

Office Use Only



300302505803

08/14/17--01041--010 **35.00

AUG 2 1 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	PRATION: DMR Consulting,	Inc.			
DOCUMENT NUM	IBER: P98000086663				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Mary Carmichael				
	Name of Contact Person				
	DMR Consulting, Inc.				
	Firm/ Company				
	7512 Holley Circle				
	Address				
	Panama City Beach, FL 32408				
		City/ State and Zip Cod	e		
mle	armichael@dmreinec.com				
	=	sed for future annual report	notification)		
		·			
For further information	on concerning this matter, pleas	se call:			
Mary Carmichael		at (230-3767		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment 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 AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationP.O. Box 6327Clifton Building		Iment Section on of Corporations			

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

P 18 000 8663 (Document Number of	of Corporation (if known)	
cursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation ado	pts the following amendment(s)
. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or or ord "chartered." "professional association," or the abbreviation	"Co". A professional corporati	
B. Enter new principal office address, if applicable:	7512 Holley Circle	
Principal office address MUST BE A STREET ADDRESS)	Panama City Beach, FL 3240	08
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7512 Holley Circle	
	Panama City Beach, FL 3240)8 <u>§</u> 8
		of the
. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent Name of New Registered Agent	<u>s:</u>	
Name of New Registered Agent NA	reet address)	Florida
Name of New Registered Agent N A (Florida si	(City)	Florida(Zip Code)

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	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	TR/S	Max Nelson Edwards, JR.	309 San Souci Blvd.	
Add			Panama City Beach, FL 32413	
X Remove				
2)Change		-		
Add			 	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add			 	
Remove				
5) Change		_		
Add				
Remove				
) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
√A	
·	-
	
	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	
(if not applicable, indicate N/A) N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<u></u>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"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 sha action was not required.	areholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated Signature	older
(By a director, president of other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary) (Typed or printed name of person signing)	ner court
(Title of person signing)	
,	