P990000 71297

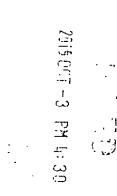
(Rec	questor's Name)	
·		
(Add	dress)	
(Add	dress)	
	(O) 1 (T) 101	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u> </u>
V	Ź	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
		i

Office Use Only



000335133180

10 03/19 -81803--029 **53.50



R. WHITE 00T 18 2.3

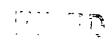
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	Sylvia Wells-Cull	lins. INC.	
DOCUMENT NUMB	P99000071297	;	
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Sylvia Wells-Cullins		
	FLOODWELL, INC.	Name of Contact Person	
	16708 NW 174rd TER	Firm/ Company	
	Alachua, FL 32615	Address	
•		City/ State and Zip Code	
sylvis	awellscullins@yahoo.com		
	E-mail address: (to be us	sed for future annual report i	notification)
For further information	concerning this matter, pleas	se call:	
Sylvia Wells-Cullins		9545220522 at (_)
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depai	rtment 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)
Amer Divis P.O.	ing Address Indicate the section of Corporations Box 6327 hassee, FL 32314	Division Clifton	Address nent Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Sylvia Wells-Cullins, Inc.	2015 0 0 7 - 3 PM L: 20
(Name of Corporation as of P990000712297	currently filed with the Florida Dept. of State)
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statut ts Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora FLOODWELL, INC	ition:
	The new proporation," "company," or "incorporated" or the abbreviation to," or "Co". A professional corporation name must contain the printing "P. t."
• •	16708 NW 173rd TER
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ALACHUA, FL 32615
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(N/A
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
N/A Name of New Registered Agent	address:
	(lorida street address)
New Registered Office Address:	, Florida(City) (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if changing Registered	(City) (Zip Code)
I hereby accept the appointment as registered agent. I am fo	amiliar with and accept the obligations of the position.
<u> </u>	Pulling
Signature a	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.

Mike Jones, V as RemoveExample:	, and Sai	lly 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			\
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
(Attach adamon	ui sneets, y necessary). The specific)
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
·	
<u></u>	
	
	
If an amendme	nt provides for an exchange, reclassification, or cancellation of issued shares,
<u>provisions for</u>	implementing the amendment if not contained in the amendment itself: icable_indicate_N/A
(у погарр	icane, marcale WA)
	
	

The date of each amendment(s) a	doption:	, if other than th
date this document was signed. OX	TOBER 15, 2019	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ladocument's effective date on the De	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendafficient for approval.	iment(s)
	proved by the shareholders through voting groups. The following reach 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 ad action was not required.	opted by the board of directors without shareholder action and sha	reholder
action was not required.	opted by the incorporators without shareholder action and shareho	lder
Dated	,	
Signature (El Pullins	
(By a c selecte	director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
Appen.	SYLVIA WELLS-CULLINS	
	(Typed or printed name of person signing) PRESIDENT, RESIDENT AGENT	
	(Title of person signing)	