## P99000003885

(Re	equestor's Name)			
(Ad	dress)			
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Amend Ch8

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: KW REFERRAL SERVICES INC. DOCUMENT NUMBER: P99000103885					
	f Amendment and fee are su				
Please return all corresp	oondence concerning this ma	tter to the following:			
1	PATRICIA A. MO	RRISON			
_		Name of Contact Person	1		
	KW REFERRAL:	SERVICES INC.	•		
<del>-</del>		Firm/ Company			
•	600 1 AVE N, SU	IITE 303			
-		Address	_		
;	ST PETERSBUR	G, FL 33701			
-	<u> </u>	City/ State and Zip Cod	2		
DAT	MAKN COM				
FAI	M@KW.COM	sed for future annual report	notification)		
	D-mair address, (to be de	sed for ruture annual report	notification)		
For further information	concerning this matter, pleas	se call:			
PATRICIA A.	PATRICIA A. MORRISON at (727 ) 434-0953				
Name of	f Contact Person	Area Co	de & 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		Street	Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## KW REFERRAL SERVICES INC.

(Name of Corporation as currently filed with the	Florida Dept. of State)
P99000103885	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  JUST REFERRALS TAMPA BAY INC.	The new
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 name must contain the
B. Enter new principal office address, if applicable:	2119 W BRANDON BLVD
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	SUITE E
	BRANDON, FL 33511
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2119 W BRANDON BLVD
	SUITE E
	BRANDON, FL 33511
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
(Cit	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Ages	nt:
I hereby accept the appointment as registered agent. I am familia.	
Signature of New Registeres	d 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: X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	Y	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	MGF	<u> </u>	NILES GRAVES SPENCER	2119 W. BRANDON BLVD
✓ Add				SUITE E
Remove				BRANDON, FL 33511
2) Change		_		
Add				<del></del>
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				<del></del>
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:					
(	(Attach additional sheets, if necessary). (Be specific)				
-					
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_					
	, , , , , , , , , , , , , , , , , , ,				
	$\cdot$				
	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)				
	(3				
_					
_					
_					

date this document was signed.	adoption:	, if other than th
Effective date if applicable:	DECEMBER 1, 2014	
Enterve date in appareasie.	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	11-25-14	
Signature	Portricia a Marrism	
` `	a director, president or other officer – if directors or officers have not been	
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	PATRICIA A. MORRISON	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	<del></del>