P99000110981

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600273476366

06/01/15--01042--005 **35.00

2015 JUN -1 AM 4: 58

JUN 09 2014 C. CARROTHERS

COVER LETTER-

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: JLS APPRAISALS, INC.						
DOCUMENT NUMB	DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
1	Barb McBride					
•	Name of Contact Person					
<u>;</u>	South Beach Tax & Financial Services					
	<u>.</u>	Firm/ Company				
:	320 Osceola Avenue					
•		Address				
	Jacksonville Beach, FL 32250	0				
-		City/ State and Zip Cod	e			
المالمان	Baura!! aaur					
Jsoidte	gmail.com E-mail address: (to be us	sed for future annual report	notification)			
	•	•	,			
For further information	concerning this matter, pleas	se call:				
Barb McBride		at (904) 241-2533			
Name o	f Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for	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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation of

JLS APPRAISALS, INC.	
(Name of Corporation as current)	y filed with the Florida Dept. of State)
P99000110981	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	JUN THE STATE OF T
JLS CONSULTANTS, INC.	Serie new c
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or GO.," or the designation "Corp," "Inc," or word "chartered," "professional Association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must compain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. <u>If amending the registered agent and/or registered office add new registered agent and/or the new registered office address</u>	
Name of New Registered Agent N/A	
(Florida st	reet address)
New Registered Office Address: N/A	. 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 I	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 <math>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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			4
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attacl	mending or adding additional Articles, enter change(s) here sch additional sheets, if necessary). (Be specific)	;
<u>/A</u>		
lf an a	n amendment provides for an exchange, reclassification, or ovisions for implementing the amendment if not contained i	cancellation of issued shares, n the amendment itself:
((if not applicable, indicate N/A)	
		

The date of each amendment(s) adopt date this document was signed.	lion: May 1, 2015	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, the transfer of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendrient for approval.	nent(s)
☐ The amendment(s) was/were approve must be separately provided for each	red by the shareholders through voting groups. <i>The following s</i> ech voting group entitled to vote separately on the amendment(s)	lalement):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and share	:holder
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and sharehold	ler
Dated5/1	2015	
Signature O	spline L. Soldt	
selected, b	or, president or other officer - if directors or officers have not y an incorporator - if in the hands of a receiver, trustee, or othe fiduciary by that fiduciary)	
Jos	ephine L. Soldt	
	(Typed or printed name of person signing)	
Pre	esident	
	(Title of person signing)	