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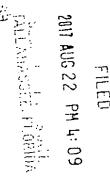
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C. GOLDEN AUG 2 4 2017

COVER LETTER

TO: Amendment Section

Division of Corporations

West Ridge South, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bernstein Accounting Northlase Biva bernsteintax. COM For further information concerning this matter, please call: 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 Filling Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

	of		2017 4110 00	D
WEST RICHE SO	uth. Lnc.		2017 AUG 22	PM 4: 1
(Name of Corporation as curre		rida Dept. of State) TÁLLAHÁSSÉ	ia shd
V178	388	2,1		E. FLORI
(Document Numbe	r of Corporation (if kno	wn)		_
ursuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	nis <i>Florida Profit Corp</i>	oration adopts the fi	ollowing amendn	nent(s) to
If amending name, enter the new name of the corporation:				
			The ne	`M'
ame must be distinguishable and contain the word "corpora Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or ord "chartered," "professional association," or the abbreviation	r "Co". A professione			
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)				
. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		-		
If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre		r the name of the		
Name of New Registered Agent				
(Florida	street address)		····	
New Registered Office Address:		Florida		
	(City)		(Zip Code)	
ew Registered Agent's Signature, if changing Registered Age	ent:			
hereby accept the appointment as registered agent. I am familia		bligations of the po	sition.	
Signature of Nev	v Registered Agent, if ci	hanving		

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 Do	<u>oe</u>	
X Remove	Y	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u> f	<u> </u>	Stacy Chernett	7108 - Fairway DR. # 120
Add X Remove				Palm Beach Gardens F1. 33418
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Romava				

If amending or adding additional Art (Attach additional sheets, if necessary).	<pre>cles, enter change(s) here: (Be specific)</pre>		
N/A			
			
			
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lf an amendment provides for an excl	ange, reclassification, or c	ancellation of issued s	hares,
(if not applicable, indicate N/A)	ndment if not contained in	the amendment itself:	_
(g not appression, indicate (mil)			
NIA		· · · · · · · · · · · · · · · · · · ·	
			
<u> </u>			

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	, ii other than th
Effective date if applicable:	
Effective date if applicable: (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, this date w document's effective date on the Department of State's records.	ill not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east 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 shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Scorr Berman	
(Typed or printed name of person signing)	
Arsident	
(Title of person signing)	