

604142

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(Address)

(Address)

(City/State/Zip/Phone #)

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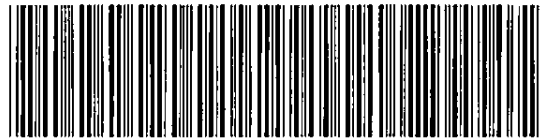
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Name Change Solomon, Vigh & Springer, P.A.

(Name of Corporation)

DOCUMENT NUMBER: 604142

The enclosed *Resolution of the Board of Directors to Change the Alternate name for use in Florida* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert A. Vigh

(Name of Contact Person)

Solomon, Vigh & Solomon, P.A.

(Firm/Company)

P.O. Box 3275

(Address)

Tampa, FL 33601-3275

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert A. Vigh

(Name of Contact Person)

at (813) 229-0115
(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for the following amount:

☐ \$35.00 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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

STATE
FL

**RESOLUTION OF THE BOARD OF DIRECTORS TO CHANGE
THE ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Marvin Solomon, do hereby certify
(Name)

that this Resolution of the Board of Directors of Solomon, Vigh & Springer, P.A.

(Name of Corporation)

a corporation duly organized and existing under the laws of Florida,
(State or Country)

was adopted on June 19, 2025, changing the alternate

name in Florida from Solomon, Vigh & Springer, P.A. to
(Current Alternate Name)

Solomon, Vigh & Solomon, P.A.

(Alternate Name) NOTE: Must contain a corporate suffix

and its real name is unavailable in Florida.

Date: 6/19/2025

[Signature]
Signature of Chairman, Vice Chairman of the Board, a
director or any officer

President

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and mail to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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President

Signature of Chairman, Vice Chairman of the Board, a
director or any officer

Title of person signing

FILING FEE \$35

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Tallahassee, FL 32314