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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	orenzo Oldain Thompson, CPA, P.A.
DOCUMENT NUM	ИВЕR:	P03000014381
The enclosed Article	es of Amendment and fo	ee are submitted for filing.
Please return all cor	respondence concerning	this matter to the following:
•••		Lorenzo Thompson
		Name of Contact Person
,	Lorenzo	Oldain Thompson, CPA, P.A.
-	Firm/ Company	
		4404 Dibbloodolo Long
		4401 Ribblesdale Lane Address
-		Orlando, FL 32808 City/ State and Zip Code
	lt(E-mail address: (to be	Dlothompson.com used for future annual report notification)
•	ion concerning this mat	
Lorenz	o Thompson, CPA	at (407) 298-7830 Area Code & Daytime Telephone Number
•		nt made payable to the Florida Department of State:
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) \$ 52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendment Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of	ROIDSINGED
Lorenzo Oldain Thompson, CPA, P.A.	TASEORY 29 PM
(Name of Corporation as currently filed with the Florida Dept. of State)	TELAHARAY DE 13
P03000014381	SEE, FLOATE
(Document Number of Corporation (if known)	

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

	dain Thompson, P.A.	The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc," or "Co	". A professional corporation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
		enter the name of the
D. If amending the registered agent and/or r new registered agent and/or the new regis		enter the name of the
		enter the name of the
new registered agent and/or the new regis		enter the name of the
new registered agent and/or the new regis	stered office address:	, Florida
new registered agent and/or the new regis	stered office address:	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
SVP	Cliffton E. Jeffers	105 Melonie Lane Warner Robins. GA 31088	_
			_
			_
	nding or adding additional Articles, en additional sheets, if necessary). (Be sp		
provis	mendment provides for an exchange, ions for implementing the amendmen not applicable, indicate N/A)		
 		•	
		-	
			

The date of each amendmen	t(s) adoption: <u>07/</u>	15/2010
Effective date if applicable:	07/15/2010	(date of adoption is required)
	(no more than 90	days after amendment file date)
Adoption of Amendment(s)	(<u>CHE</u>	CCK ONE)
The amendment(s) was/we by the shareholders was/w		chareholders. The number of votes cast for the amendment(s) oproval.
		shareholders through voting groups. The following statemen group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	ment(s) was/were sufficient for approval
by		,,,
	(voting group)	
action was not required.		poard of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the i	ncorporators without shareholder action and shareholder
Dated_7/15	5/2010	1000
. Signature _		AN S
		an or other officer - if directors or officers have not been
	ected, by an incorpt pointed fiduciary by	orator – if in the hands of a receiver, trustee, or other court
	·-···-	,
		Lorenzo Thompson
	(Type	ed or printed name of person signing)
		President
	(Title of	person signing)