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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ABLE AD DOCUMENT NUMBER: P030000443	VISORY INC. 21	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Michael Chapm	an	
· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n
AOMAC	. with or contact Person	•
•	Firm/ Company	
700 Eleventh St	reet South PH	2
 	Address	
Naples, FL 3410	02	
	City/ State and Zip Code	e
michael@aomac.co	om	
E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Michael Chapman	_{at (} 239	, 430-4310
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle

Articles of Amendment to Articles of Incorporation of

ABLE ADVISORY INC. (Name of Corporation as currently filed with the Florida Dept. of State) P03000044321 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) Florida New Registered Office Address: (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 Registered Agent, if changing

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	
f an amandment provides for an avai	change, reclassification, or cancellation of issued shares,
i an amenument provides for an exci	
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the amo (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
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provisions for implementing the ame	nendment if not contained in the amendment itself:

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Michael Chapman	2208 Goshawk Ct
Add	_		Naples, FL 34105
Remove			
2) Change	V	Vesna Able	700 11st S
Add			Naples, FL-34705 34102
Remove			
3) Change			
Add			
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) ad	option;	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated5/8	iliz	
Signature	aul AS	
	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
• •		
	DANGELLE L. SMOH	<u>.</u>
	(Typed or printed name of person signing)	
	DANCE LE L. Sm M. (Typed or printed name of person signing) SECRETARY DIRECTOR (Title of person signing)	
	(Title of person signing)	