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SEPRETARY OF STATE
AFFAHASSEE FLORIDA



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	aw Office of Travic W. Truebland, P.4.
DOCUMENT NUMBER: P 04	000 102671
The enclosed Articles of Amendment as	nd fee are submitted for filing.
Please return all correspondence concer-	ning this matter to the following:
Traviz	W: Truebland (Name of Contact Person)
	(Name of Contact Person)
truebl	(Firm/Company)
	(Firm/ Company)
221	E. Lime Street (Address)
	(Address)
Lake	lard, FL 33801
<u> </u>	(City/ State and Zip Code)
For further information concerning this	matter, please call:
Travis w. trueblood	at (954) 447-0473
(Name of Contact Person)	at (954) 447-0477 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following an	nount:
\$35 Filing Fee \$43.75 Filing Fee Certificate of Stat	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

OS NOV 14 PN 9: 01

TALLAHASSFEFSTATE

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Law office of Travis W. Trueblood, P.A.

(Name of corporation as currently filed with the Florida Dept. of State)

P 04 000 102671

(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:

NEW CORPORATE NAME (if changing):

Truebles Law Group, 1.4.	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp (A professional corporation must contain the word "chartered", "professional association," or	o.," "Inc.," or "Co.") the abbreviation "P A ")
(1) professional corporation musi contain the word chartered, professional association, of	ine abbreviation 1 mil)
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicat	e Article Number(s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
and or interest the (b) comp aniental, added or action (<u>DE 21 Don 10</u>)	
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	·····
(Attach additional pages if necessary)	
(Attach additional pages if necessary)	
If an amondment muscides for evaluation and existing tion on concellation of ign	und ahaman mmatticians
If an amendment provides for exchange, reclassification, or cancellation of issues in the control of the contro	
for implementing the amendment if not contained in the amendment itself: (if n	of applicable, indicate N/A

(continued)

The date of each amendment(s) adoption:
Effective date if applicable: 11-9-45 (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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 cast 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.
Signature W. Toulded (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)
TRAVIS W. TRVEBUOD (Typed or printed name of person signing)
(Typed or printed name of person signing)
DIRECTOR
(Title of person signing)

FILING FEE: \$35