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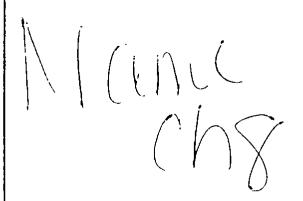
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:

Casly Brady, P. A.

POW0000 W8 W8

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Casly Flannery

Name of Contact Person

(asly Brady P.A.

Firm/ Company

12180 South Shore Blvd. # 102

Address

Welling ton, FL 33414

City/ State and Zip Code

Casly bf su C gmail. Com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Casey Flannery	a1 (561) 718-1472
Name of Contact Person	Area Code & Daytime Telephone Number

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

\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is	\$52.50 Filing Fee Certificate of Status Certified Copy
		enclosed)	(Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Tallahassee, FL 32303

Street Address

Articles of Amendment

to

Articles of Incorporation

of

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

P04000066868 (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: asey Brady Flannery, P.A. 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 <u>MUST BE A STREET ADDRESS</u>) 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) 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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

N/A	heets, if necessary). (Be sp			
<u> 19/7\</u>	······			<u>.</u>
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			.	
an amendment	provides for an exchange, re	eclassification, or canc	eliation of issued share	2 <u>5,</u>
orovisions for im	plementing the amendment	if not contained in the	e amendment itself:	
	ble, indicate N/A)			
<u> </u>				
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The date of each amendment(s) adoption:date this document was signed.	11-11-2021	, if other than the
•	1 - 1 - 2021 no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not r document's effective date on the Department of Sta		requirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☼ The amendment(s) was/were adopted by the inc action was not required.	orporators, or board of directors wi	thout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app		st for the amendment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro		
"The number of votes cast for the amendn	nent(s) was/were sufficient for appr	oval
by(voting		···
(voting	group)	
Dated 11-11 - 20	21	
Signature Cally	7 lanney	
(By a director, presider	nt or other office f – if directors or operator – if in the hands of a receiver	
	Casey Flan	nery
(Ту	ped or printed name of person signi	ng)
	President	
(Tit	le of person signing)	