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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

.

NAME OF CORPORATION: MARIE I	KARIMPANAL CPA PA		
DOCUMENT NUMBER: P1000001243	7		
The enclosed Articles of Amendment and fee	e are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
MARIE KAI	RIMPANAL		
	Name of Contact Person		
CHRYSS	TORRES CPA PA		
	Firm/ Company		
5725 CO	RPORATE WAY STE 203		
· <u> </u>	Address		
wes	T PALM BEACH, FL 33407		
	City/ State and Zip Code		
MKARIMPA)	NALCPA@GMAIL.COM		
E-mail address: (	to be used for future annual report notification)		
For further information concerning this matte	779-2357		
Name of Contact Person	at ( 361 ) 177 2337  Area Code & Daytime Telephone Number		
	t made payable to the Florida Department of State:		
\$35 Filing Fee \$43.75 Filing F Certificate of S			
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

#### **Articles of Amendment**

to

# Articles of Incorporation

of

### MARIE KARIMPANAL, CPA PA

(Name o	f Corporation as currently	filed with the Floric	la Dept. of State)		
	(Document Number of 0	Corporation (if know	n)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fi	lorida Profit Corpord	ation adopts the follow	ing ame	ndment(s) to
A. If amending name, enter the new na	me of the corporation:				
CHRYSS TORRES CPA PA				The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". A			tion "Co	orp.,"
B. Enter new principal office address, i	if applicable:	N/A	5101	202	
(Principal office address MUST BE A STREET ADDRESS)				35.6	17
			· · · · · · · · · · · · · · · · · · ·	<u>`¬ı</u>	6 12 223 V 122 22
			<del> </del>	<u>ယ</u>	<u>—</u> : ::.
C. Enter new mailing address, if appli-		N/A		2	. 50
(Mailing address <u>MAY BE A POST (</u>	OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	بې 2	_ <del>_</del>
				~~	
			·		
5.16					
D. If amending the registered agent and new registered agent and/or the new		ss in Florida, enter t	the name of the		
Name of New Registered Agent	MARIE KARIMPANAL		<u> </u>	_	
	5725 CORPORATE WA	AY STE 203			
	(Florida street	address)		<del></del>	
New Registered Office Address:	WEST PALM BEACH		Florida 33407	,	
	(City)		,	(Zip Code)	
					<b>\</b>
N. B. L. L. L. S. G. L. S.					
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Agent: red agent. I am familiar wit	h and accept the obli	igations of the position.		
· ·					
·	- CV - D		<del></del> .	_	
	Signature of New Reg.	istered Agent, if char	nging		
Check if applicable					
☐ The amendment(s) is/are being filed pu	rsuant 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.

Example: X Change	PT	John Doe	e				
X Remove	V	Mike Jor	<u>nes</u>				
<u>X</u> Add	<u>SV</u>	Sally Sm	<u>iith</u>				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
1) Change	<del></del>				<u>-</u>		
Add							
Remove							
2) Change		<u> </u>					
Add							
Remove 3) Change		_					
Add						<del></del>	
Remove					•		
4) Change		_					
Add							
Remove							
5) Change				<u> </u>			
Add							
Remove				•			
6) Change		_		·			
Add							
Remove							

Attacii aaamonai sneeis,	if necessary). (Be	specific)			
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an amendment provid	es for an exchange	reclassification	or cancellation o	fissued shares	
rovisions for implemen	nting the amendme	nt if not contain	ed in the amendn	ient itself:	
storisions for implemen	dicate N/A)		٠		
(if not applicable, in					
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The date of each amendment(s date this document was signed.	) adoption:	, if other than the
Effective date if applicable:	08.15.2025	
i.iieetive date <u>ii applicable</u> .	(no more than 90 days after amendment	file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing rec Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	ut shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	or the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the a	
"The number of votes of	ast for the amendment(s) was/were sufficient for approva	ıl
by		 -
	(voting group)	
Dated08.13	5.2025	
sele	a director, president or other officer – If directors or officeted, by an incorporator – if in the hands of a receiver, traditional fiduciary by that fiduciary)	
арр	since nauciary by that nauciary)	
	MARIE KARIMPANAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	