P10000044705

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT ~ MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600215185396

12/16/11--01026--003 **35.00

Effective date
1-1-2011

Meurs
12-19-11

COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORA	ATION: Robert L. S	Schimmel, P.A.	
DOCUMENT NUMBE	_{cr.} P1000004470)5	
The enclosed Articles of	**************************************	abmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
F	Robert L. Schimr	nel	
_		Name of Contact Person	n
F	Robert L. Schimr	nel, P.A.	
		Firm/ Company	
1	395 Brickell Ave	enue, Suite 800	
_		Address	
<u> </u>	∕liami, Florida 33	3131	
		City/ State and Zip Cod	e
rls@	schimmelpa.con	n	
		sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
Robert L. Schi	mmel	at (305	, 907-6012
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	
			is enclosed)
	g Address		Address
	Iment Section		ment Section
	on of Corporations ox 6327		on of Corporations
	assee, FL 32314		Building xecutive Center Circle
~ W41W11			issee, FL 32301

Articles of Amendment to Articles of Incorporation of

Robert L. Schimmel, P.A.

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

P10000044705		,		
(Document Numbe	er of Corporation (if k	mown)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Fl</i>	orida Profit Corporation ad	lopts the following	amendment(s) to
A. If amending name, enter the new name of th	e corporation:			
Schimmel, P.A.			,	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co	". A professional corpora	rated" or the abl	breviation
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)			
D. If amending the registered agent and/or reginew registered agent and/or the new registered.		s in Florida, enter the nam	ne of the	
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:		, Florida_		
The stage of the state of the s	(City)	, i londa_	(Zip Code)	
New Registered Agent's Signature, if changing 1				
I hereby accept the appointment as registered agen	nt. I am familiar wit	h and accept the obligations	of the position.	
Signature oj	f New Registered Age	ent, if changing		

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)	Title	Name	<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			

Page 2 of 4

amending or adding additional Art tach additional sheets, if necessary).	(Be specific)	
		_
amendment provides for an exchan rovisions for implementing the amount (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	

,	Page 3 01 4 adoption: November 15, 2011
Effective date <u>if applicable</u> : <u>J</u>	
Effective date <u>if applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated Nove	mber 15, 2011
Signature	mber 15, 2011
(By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Robert L. Schimmel
	(Typed or printed name of person signing)
	President
	(Title of person signing)