P13000100575

(Re	equestor's Name)	
(Ac	ldress)	
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Ginger Perkins, P.A. DOCUMENT NUMBER: P13000100575 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Ginger Perkins** Name of Contact Person Ginger Perkins, P.A. Firm/ Company 14722 San Marsala CT Address Tampa, FL 33626 City/ State and Zip Code SexT5Vette@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813 810-8325 Area Code & Daytime Telephone Number **Ginger Perkins** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Ginger Perkins, P.A.		-
(Name of Corporation as currently filed with the P13000100575	Florida Dept. of State)	
(Document Number of Corporation	(if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following	g amendment(s) to
4. If amending name, enter the new name of the corporation:		
Ginger and Tom Perkins, P.A.		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must of	
• •	NA	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		•
		-
		-
C. Enter new mailing address, if applicable:	NA	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		-
		•
		-
D. If amending the registered agent and/or registered office ad-		
new registered agent and/or the new registered office addre	s <u>s:</u>	
Name of New Registered Agent NA		
		→ ≤ 60
	street address)	
New Registered Office Address: NA (Cit	, Florida_ (Zip Code)	. 5 00
(City	(sup code)	ယ် …အ <u>ြ</u> [≺[
		<u> </u>
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian		
посод осторыне арроновиот из годинегой адени. Тит јатим	and decept the congulation of the position.	7
Signature of New Registered	d Agent, 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 <math>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 PT John Doe	
X Remove V Mike Jones	
X Add SV Sally Smith	
Type of Action Check One) Name Address	
1) Change <u>NA</u>	
Add	
Remove	
2) Change NA	
Remove	
3) Change NA	
Add	
4) Change NAAdd	
Remove	
5) Change	
Add	
Remove	
6) Change NA	

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
NA					
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provisio	nendment provides for a ons for implementing the not applicable, indicate N	e amendment if not o	ication, or cancella contained in the am	tion of issued shares, endment itself:	
		······		· · · · · · · · · · · · · · · · · · ·	
					
					

The date of each amendment(s) adoption:		, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Feb	ruary 27, 2014	
Saica		
Signature	By a director, president or other officer – if directors or officers have not been	
So	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Ginger Perkins	
	(Typed or printed name of person signing)	
	PTD	
	(Title of person signing)	