P14000012312

(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



200275491852

07/31/15--01012--012 **43.75

DVISION OF THE STATE.

Amenda

AUG 3 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: DANIEL PHILIP GAGNON PA **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TR LAXMN Name of Contact Person T R THE TAXMAN INC Firm/ Company 9858 CLINT MOORE RD., SUITE C111-131 Address BOCA RATON, FL 33496 City/ State and Zip Code tr@trthetaxman.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: T R LAXMAN Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **■**\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & □ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

1	n	3	N	JΙ	FI	1	D.	Н	T	7	P	0	. Δ	1	١:	V	c	1	J	P/	Δ

DANIELTHEIT GAGNONTA	
	currently filed with the Florida Dept. of State)
P 14000012312	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion;
NA	The new
	poration," "company," or "incorporated" or the abbreviation c." or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)
	<u> </u>
C. Enter new mailing address, if applicable:	NA J
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	3
	一
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
NΔ	audi C55.
Name of New Registered Agent	
(Flo	orida street address)
New Registered Office Address:	, Florida
	(City) (7ip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.
Signature o	f New Registered 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 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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	ALINA S GAGNON	19220 NATURES VIEW CT
X Add			BOCA RATON, FL 33498
Remove			
2) Change		<u></u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
		
	 	<u></u>
an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
		=

<u>'</u>	JULY 1, 2015	
The date of each amendment(s) date this document was signed.	adoption:	, if other than th
π	LY 27, 2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	, , ,	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.)
	oproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"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.	lopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder	
JULY 27	2015	
Dated	0 0	
g: A/	Line Harris	
Signature (By a	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 cour	t
арро	nted fiduciary by that fiduciary)	
	DANIEL P GAGNON	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	