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C. LEWIS MAY 7 2014 **EXAMINER**

COVER LETTER

TO: Amendment Section

Division of Corpo	rations				
NAME OF CORPOR	ATION: CHRIS SO	ARES, P.A.			
DOCUMENT NUMB	_{ER:} P1400001873	30			
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Jose Perez				
-	Name of Contact Person				
	JP Global Business Solutions Inc				
-	Firm/ Company				
	1395 Brickell Ave Suite 800				
_	Address				
	Miami, FL 33131				
-		City/ State and Zip Code	2		
		ell@jpgbusiness			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Jose Pere		at (2008357		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
	ndment Section ion of Corporations		ment Section n of Corporations		
P.O. !	Box 6327	Clifton	Building		
Talla	hassee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

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SECRETARY OF STATE. TALLAHASSEF, FLORIDA

CHRIS SOARES, P.A.

(Non-SC	TALE MINOSUL IN USAGE
(Name of Corporation as currently filed with the Flo P1400018730	rida Dept. of State)
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
CRISTIANO SOARES, P.A.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address: (City)	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit Signature of New Registered Agent	

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name .	Address
1) Change				
Add				
Remove				
2) Change		·		
Add				
Remove				
3) Change		_		
Add				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:



•	14 APR 28 PM 2: 43
The date of each amendment(s) adoption:	04/21/2014 14 APR 28 PM 2: 43 SECRETARY OF STATE
date this document was signed.	SECRETARY OF STATE TALE AHASSEELF LORIDA
Effective date if applicable:	
(no	more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK	ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient for approv	olders. The number of votes cast for the amendment(s) al.
The amendment(s) was/were approved by the share must be separately provided for each voting group	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):
"The number of votes cast for the amendmen	t(s) was/were sufficient for approval
by(voting gr	,
(voting gr	oup)
The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incorp action was not required.	orators without shareholder action and shareholder
Dated 04/21/2014	
Signature	r other officer - if directors or officers have not been
	or - if in the hands of a receiver, trustee, or other court
	Cristiano Soares
	(Typed or printed name of person signing)
	President
	(Title of person signing)