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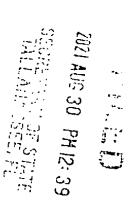
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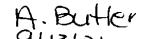
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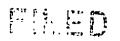
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LUCIA M. BAR	BOSA, PA.			
DOCUMENT NUMBER: P14000026103				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this n	natter to the following:			
JENNIFER CORDEIRO				
Name of Contact Person				
	Firm/ Company			
13 SECKEL CT				
	Address			
PALM COAST FLORIDA	. 32164-4419			
	City/ State and Zip Code			
E-mail address: (to be	eused for future annual report notification) ease call:			
JENNIFER CORDEIRO	at (508) 837 - 8098			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	de payable to the Florida Department of State:			
■ \$35 Filing Fee Securificate of Status				
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 Articles of Incorporation



LUCIA M. BARBOSA, PA.

LUCIA M. BARBOSA, PA.		m. 1 wish the Florida Dan	. afi\$tafai∩ 20 D≌ I	2. 2	
(Name of	Corporation as currently	filed with the Florida Dep	<u>1. q((Stafe)</u> (§ 30 PH	د. ي	
P14000 0 26103				TAIT	
	(Document Number of	Corporation (if known)	FLEATH SEE.	, FE	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this I	Florida Profit Corporation a	dopts the following amen	ndme	
A. If amending name, enter the new na	me of the corporation:				
JENNIEER CORDEIRO PA			The		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co"chartered," "professional association,"	prp_i mc_i or co . π	company," or "incorporated" 1 professional corporation	or the abbreviation "Co" name must contain the	orp.,' word	
		13 SECKEL CT			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		PALM COAST FLORIDA 32164-4419			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		13 SECKEL CT		_ _	
		PALM COAST FLORIDA 32164-4419			
D. If amending the registered agent ar new registered agent and/or the new	nd/or registered office add	lress in Florida, enter the n	ame of the		
	JENNIFER CORDEIRO				
Name of New Registered Agent					
	13 SECKEL CT				
	·	irees address)	32164-4419		
New Registered Office Address:	PALM COAST	(61)	, Florida (Zip Code)	 }	
		(City)	1-7		
New Registered Agent's Signature, if a lareby accept the appointment as regis	stered agent. I am jaminar	with the deception and the second			
	ignature of New	Registered Agent, if changing	g		

Check if applicable

The amendment(s) is/are being filed pursuant 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, nan 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: Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officer. 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. 1 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 C 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	<u>Title</u>	Name	<u>Addres</u> s
(Check One)	PRES	LUCIA BARBOSA	621 BYRON AVE
1) Change			DAYTONA BEACH FL 32114
Add			
X Remove	DDEC	JENNIFER CORDEIRO	13 SECKEL CT
2) Change	PRES		PALM COAST FLORIDA 32164
X Add			- ADM CONSTITUTION
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

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•	06-01-2021	:C = 41- = - •
The date of each amendmen date this document was signed	t(s) adoption:	, if other t
Tate this document was signed	06-01-2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be lister
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder action	and shareholder
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
☐ The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
04.00	7-202 i	
Dated	-2021	
Signature _	By a director, president or other officer – if directors or officers have not been	
() S	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	appointed fiduciary by that fiduciary)	
	Lucia Barbosa	
	(Typed or printed name of person signing)	
	PRESIDENT/OWNER	
	(Title of person signing)	