## P14 0000 98655

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	L.M. SCHNEIDEF RATION:	R LAW, P.A.		
	P14000098655 BER:			
	of Amendment and fee are sul	bmitted for filing.		
	spondence concerning this ma	-		
	Leslie Mark Schneider	Ç		
	Schneider Law Firm, P.A.	Name of Contact Persor		
	100 SE Third Avenue, 10th F	Firm/ Company loor		
	Fort Lauderdale, FL 33394	Address		
	City/ State and Zip Code			
	les@collection.law			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
Leslie Mark Schneide	r	954 at (	300-2440	
Name of Contact Person			le & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee F. Monroe Street, Suite 810 ssee, FL 32303	

## Articles of Amendment

## Articles of Incorporation of

L.M.	SCHNEIDER LAW, P.A.	
( <u>Name of C</u>	Corporation as currently filed with the Florida Dept. of State)	
	P140000 98655	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follo	owing amendment(s) to
A. If amending name, enter the new name Schneider Law Firm, P.A.	e of the corporation:	77
	word "corporation," "company," or "incorporated" or the abbrevo," "Inc," or "Co". A professional corporation name must co the abbreviation "P.A."	
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STRI</u>		
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re	or registered office address in Florida, enter the name of the egistered office address:	<del>-</del>
Name of New Registered Agent		<del></del>
_	(Florida street address)	
New Registered Office Address:	. Florida	
		Zip Coder
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	iging Registered Agent; d agent. I am familiar with and accept the obligations of the positi	ion. 21 UI 19
	Signature of New Registered Agent, if changing	<u> </u>

53

S S

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, 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	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			<del></del>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

uach <i>additional she</i>	ets, if necessary). (Be	specific)			
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un umandmant nec	yides for an exchange,	madaggification c	on annuallation of i	creat abares	
rovisions for imple	menting the amendme	nt if not contained	or <u>cancenation or is</u> Lin the amendmen	t itself:	
(if not applicable	. indicate N/A)		· III CIIC AINCING	11134111	
				<del></del>	
	-	_			
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					<del></del>

The date of each amendment(s) adoption:	if other than the
date this document was signed.	n oner than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	raction and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendr by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
7-14-21	
Dated	
Signature	
(By a director, president or other officer - if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other	court
appointed fiduciary by that fiduciary) Leslie Mark Schneider	
Deane Phare Demond	
(Typed or printed name of person signing)	<del></del>
Managing Shareholder	

(Title of person signing)