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Jame Chang

JUL 0 5 2017

D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: JENN	IFER BON	AMARTE, P.A.
DOCUMENT NUMBE	R: <u>PI50000</u>	Z &0 38	
The enclosed Articles of	*Amendment and fee are su	bmitted for filing.	
Please return all correspondent	ondence concerning this mat	tter to the following:	
_	Jennifer	Elsaesser Name of Contact Person	1
_	1661 Bi	Firm/ Company Clie Or;	ve
_	1661 Bi Naples	F C 3 City/ State and Zip Code	4120
	Cloud 9 Napl E-mail address: (to be us	ed for future annual report	Com
For further information of	concerning this matter, pleas	e call:	
	El saesser Contact Person	at (239 Area Co	
Enclosed is a check for t	he following amount made p		
\$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)
Ameno Divisi P.O. E	ng Address dment Section on of Corporations dox 6327 assee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

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SECRETÁRY OF STATE

Articles of Amendment to Articles of Incorporation

Of		
JENNIFER BON (Name of Corporation as currently	AMARTE, PA.	
_		
P1500002803		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation adopts the following amendmen	it(s) to
A. If amending name, enter the new name of the corporation:		
JENNIFER ELSAESSER, 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	o". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1661 Birdie Drive Naples, FL 34120	•••
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17 JUN 25	IVISION OF CORPU
D. If amending the registered agent and/or registered office addressing new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	STATE PRATIONS
Name of New Registered Agent WJA		
(Florida stree	t address)	
New Registered Office Address: N/A	, Florida (Zip Code)	
, (C	City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.	

Signature of New Registered Agent, if changing

NA

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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add	NIA		
2) Change			
Add	•		
Remove	N/A		
3) Change	<u> </u>		
Add			
Remove	N/A		
4) Change			
Add			
Remove	NA		
5) Change			
Add			
Remove	N/A		
6) Change			
Add			
Damoura	NA		

). (Be specific)			
NA				
	,	·		
			-	

f		4:	afternal shares	
f an amendment provides for an ex provisions for implementing the ar	enange, reclassifica	itained in the amend	ment itself:	
(if not applicable, indicate N/A)			<u> </u>	
(J 11 /				
NA				<u></u>

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this locument's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	г
Dated(0/1/2017	•
Signature	een
selected, by an incorporator - if in the hands of a receiver, trustee, or other	
appointed fiduciary by that fiduciary)	
Jennifer El Saesse, (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	