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COVER LETTER

TO: Amendment Section Division of Corporations

,

Tallahassee, FL 32314

NAME OF CORPOR	RATION: Adriana Gutierrez	Inc			
	BER: P19000061467				
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.			
Please return all corres	spondence concerning this ma	utter to the following:			
	Adriana Gutierrez				
	Name of Contact Person				
	Firm/ Company				
	1634 SW Buffum Ln				
	Address				
	Port St Lucie,FL,34984				
	<u></u>	City/ State and Zip Cod	c -		
adria	na@teamcardenas.net				
		sed for future annual report	notification)		
For further information	n concerning this matter, pleas	·			
Adriana Gutierrez		561 at (de & Duytime Telephone Number		
Name (of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)		
Ame Divis	ling Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	117	
	Articles of Incorporat	
	υf	
Adriana Gutierrez Inc		

	y filed with the Florida Dept. of State)
219000061467	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006 , Florida Statutes, this I is Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Adriana Gutierrez PA	
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	E . 92 - 73
	<u>\bigcip \bigcip \bigcip</u>
Enter new mailing address, if applicable:	i - 👱 🗇
(Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office addr 	ress in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	ect address), Florida (Zip Code)

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	
<u>X</u> Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
KKIIKAC			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific)
Article I: To amend the Name of the corporation from: Adriana Gutierrez Inc to Adriana Gutierrez PA
Article III: To amend the purpose for which this corporation is organized to: Real Estates sales
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) date this document was signed.	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 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)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	;)
	pproved by the shareholders through voting groups. The following stateme in each voting group entitled to vote separately on the amendment(s):	rnt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
09/17/20	19	
Dated Signature	willtakester	
(B∳ a selec	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 inted fiduciary by that fiduciary)	t
	Adriana Gutierrez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<u> </u>