P19000075869

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COVER LETTER

TO: Amendment Section Division of Corporations

• 1

NAME OF COR	RPORATION: ADRIANNA HER	RAN PA	
DOCUMENT N	D10000075960		
The enclosed Art	icles of Amendment and fee are su	bmitted for filing.	
Please return ali c	correspondence concerning this ma	atter to the following:	
	ADRIANA HERRAN		
		Name of Contact Person	n
	ADRIANNA HERRAN PA		
		Firm/ Company	
	3333 CENTRAL GARDENS	S CIRCLE APT 210	
		Address	
	PALM BEACH GARDENS	FL 33418	
		City/ State and Zip Cod	le
	ADRIANNAHERRAN@GM	AAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	nation concerning this matter, plea		888-9091
	ame of Contact Person	at (561	ide & Daytime Telephone Number
	ck for the following amount made		•
S35 Filing Fe	ee □\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation of

ADRIANNA HERRAN PA

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	_
P190000	75869	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the follow	ving amendment(s)
A. If amending name, enter the new name of the corporation:		
ADRIANA HI	ERRAN PA	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must con	ution "Corp.,"
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	A/A	
		2021
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	; i
,	· · ·	ਂ ਯ
		: 12
 If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address 		27
Name of New Registered Agent		_
(Florida s	treet address)	-
New Registered Office Address: NA	, Florida_	
	(City) (Z.	ip Code)
		, ,
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position	n.
N/A.	Registered Agent, if changing	
Signature of New	Registered Agent, if changing	
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)

Example:

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>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		NID	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	_
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
HIA	

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)	
HIA.	

•

The date of each amendment(adention: N/A	if asker show
date this document was signed.) adoption	, if other than
Effective date if applicable:	HA.	amendment file date)
	(no more mun 20 unis uner t	amenament file dute)
Note: If the date inserted in the document's effective date on the		ry filing requirements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of direct	ectors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of very sufficient for approval.	votes cast for the amendment(s)
	approved by the shareholders through voting for each voting group entitled to vote separate	
"The number of votes	ast for the amendment(s) was/were sufficient	for approval
by NA.		<u> </u>
·	(voting group)	
M Dated	AY 7/2024	
Signature	Idrana Terran.	
sele	a director, president or other officer – if direct cted, by an incorporator – if in the hands of a cointed fiduciary by that fiduciary)	
,,	ADRIANA HERRAN	
	(Typed or printed name of pers	ion signing)
	PRESIDENT	
	(Title of person signing)	