## PBWD50807

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of	Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Hartna	ett & Assoc	ciates, CPAs, P.A.
DOCUMENT NUME	_	00050807	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Stephan	ie L. Hart Name of Contact Person	nett
	Hartnett	E + Associat	es, CPAs, P.A.
	_ ,		ew Lane
	Jackso	City/ State and Zip Code	e
		nett @ comea sed for future annual report	
For further information	concerning this matter, pleas	se call:	
Heph Name o	anie Hartne	at ( 904 Area Co	305 - 9806 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 P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle
I allo	massee, FL 32314	2001 B	ACCURIVE CERROL CHUIC

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation of

PB00050807
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(Name of Corporation as curr	ently filed with the	e Florida Dept. of State)

(Maine of C	torporation as currently i	ned with the Florida Dept. of State)	
Hartneta + 1	associates, of	PAS, P.A.	
•	(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this <i>Fl</i>	orida Profit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new name			
Stephanic L. Hartn name must be distinguishable and contain "Corp.," "Inc.," or Co" or the designation word "chartered," "professional association	on "Corp," "Inc," or "Co	<ol> <li>A professional corporation name</li> </ol>	The new the abbreviation must contain the
B. Enter new principal office address, if a		14595 Crystal Vie	ew Lane
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		Jacksonville, FL 3	2250
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)		Same as above	
D. If amending the registered agent and/o new registered agent and/or the new re		s in Florida, enter the name of the	
Name of New Registered Agent	N/A		1 <b>8</b>
	(Florida street	address)	AUG I
New Registered Office Address:	NA	, Florida	mi: on i mc: on i om(code) ≥ □
			9: 25 LORIDA
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		h and accept the obligations of the posi	tion.
	Signature of New Reg	istered Agent, if changing	

. 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.

X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Joi	nes .		
X Add	<u>sv</u>	Sally Sm	nith		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change		_		 -	
Add				-	
Remove					
2) Change		_		_	
Add				-	
Remove					
3 ) Change		_		 _	
Add				_	
Remove				-	
4) Change		_		_	
Add					
Remove				-	
5) Change		_		_	
Add					
Remove				-	
6) Change		_		_	
Add				 _	
Remove					

If amending or adding additional Au (Attach additional sheets, if necessary)	rticles, enter change(s)	here:		
•	і. (ве кресіліс)			
NIA				
	<u></u>			
	<u></u>		1100 1 100 10	<del></del> _
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		<del></del>		
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		<u>.</u>		
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				•
····			-	
If an amendment provides for an ex- provisions for implementing the am	change, reclassification,	or cancellation of	issued shares,	
(if not applicable, indicate N/A)	ienument ii not contain	ea in the amename	nt itseii:	
NA				
				•
		•		
	<del></del>			

The date of each amendment(s) adoption:	8   13   2018	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does r document's effective date on the Department of	not meet the applicable statutory filing requirements State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CE	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the ame approval.	ndment(s)
	e shareholders through voting groups. The following group entitled to vote separately on the amendmen	
"The number of votes east for the ame	ndment(s) was/were sufficient for approval	
by	ting group)	
(vo	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareh	oolder
Dated8   13   2		
· · · · · · · · · · · · · · · · · · ·	sident or other officer – if directors or officers have no orporator – if in the hands of a receiver, trustee, or of	
<u>S</u>	Typed or printed name of person signing)	
	President/owner (Title of person signing)	