

P96000011763

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(Business Entity Name)

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11 APR 21 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*TR 4-21-11*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2010

KATIE CHATTERSON  
NORTHERN TRUST LEGAL GROUP, P.A.  
614 E HWY 40, STE 112  
CLERMONT, FL 34711

SUBJECT: NORTHERN TRUST LEGAL GROUP, P.A.  
Ref. Number: P96000011763

We have received your document for NORTHERN TRUST LEGAL GROUP, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 710A00006510

**NORTHERN TRUST LEGAL GROUP, P.A.**

614 E. HWY 40, SUITE 112  
CLERMONT, FL 34711  
TELEPHONE: (646) 340-5862  
FACSIMILE: (646) 241-4042

March 12, 2010

**VIA UPS DELIVERY**

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

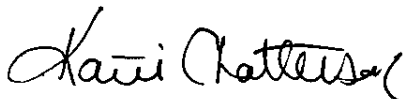
**RE: Northern Trust Legal Group, P.A.**

Dear Sir or Ma'am:

Enclosed in connection with the above-referenced matter, please find an original and one (1) copy of Amendment to the Articles of Incorporation of Northern Trust Legal Group, P.A., for filing with the State.

Additionally, please find Check No. 2076, in the amount of \$35.00 for filing the above-referenced document. Please do not hesitate to contact our office should you have any questions. Thank you for your attention to this matter.

Very truly yours,



Katie Chatterson

KC  
Enclosure

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Northern Trust Legal Group, P.A.

DOCUMENT NUMBER: P96000011763

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Walter Zebrowski  
Name of Contact Person

\_\_\_\_\_  
Firm/ Company

4327 S. Hwy 27, #545  
Address

Clermont, FL 34711  
City/ State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Walter Zebrowski at (646) 415-1217  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

\*\* Payment already received by Tina Roberts  
Check # 2076 for \$35.00 - See Attached

Mailing Address  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**\*\* Receipt of Payment \*\***



**FLORIDA DEPARTMENT OF STATE**  
Division of Corporations

March 16, 2010

KATIE CHATTERSON  
NORTHERN TRUST LEGAL GROUP, P.A.  
614 E HWY 40, STE 112  
CLERMONT, FL 34711

SUBJECT: NORTHERN TRUST LEGAL GROUP, P.A.  
Ref. Number: P96000011763

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Tina Roberts  
Regulatory Specialist II

Letter Number: 710A00006510

Articles of Amendment  
to  
Articles of Incorporation  
of

Northern Trust Legal Group, P.A.

(Name of Corporation as currently filed with the Florida Dept. of State)

P96000011763

(Document Number of Corporation (if known))

FILED  
11 APR 21 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Walter Zebrowski, JD, CPA, P.A.

*The new*

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

4327 S. Hwy 27

Suite 545

Clermont, FL 34711

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

4327 S. Hwy 27

Suite 545

Clermont, FL 34711

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_ (Florida street address)

\_\_\_\_\_ (City)

\_\_\_\_\_, Florida  
(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered 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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**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) adoption: March 11, 2010  
(date of adoption is required)

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 4/2/11

Signature Walter Zebrowski

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

WALTER ZEBROWSKI  
(Typed or printed name of person signing)

President  
(Title of person signing)