A yers, Furchand & fur	18-6404
	Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
COLD CITATION, I MANAGEMENT OF STREET	
1(Corporation Name)	(Document #)
(Corporation tvalue)	(2-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0
2. (Corporation Name)	(Document #)
(Corporation Paulic)	9000037834893 -02/27/0101116006
3	******43.75 ******43.75 (Document #)
(Corporation Name)	(Document)
4	(Dogwood #D
(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NIESKI ETT INICO	AMENDMENTS
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Directors Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership
OTHER FILINGS	REGISTRATION/QUALIFICATION 3
Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other COULLIETTE FEB 27 2001
	Examiner's Initials

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF MYERS, FOREHAND & FULLER, P.A.

Pursuant to the provisions of Section 607.1006, Florida Statutes, this Florida professional corporation adopts the following articles of amendment to its articles of incorporation:

FIRST:

Article I is amended as follows:

The name of the professional corporation is:

Myers & Fuller, P.A.

SECOND:

The date of the amendment's adoption is February 27, 2001.

THIRD:

The amendment was approved by the shareholders. The number of votes cast for the amendment was sufficient for approval.

Signed this 27 day of February, 2001.

Loula M. Fuller, President

STATE OF FLORIDA COUNTY OF LEON

BEFORE ME personally appeared <u>Loula M. Fuller</u>, to me well known and known to me to be the person described in and who executed the foregoing instrument, and who after being first duly sworn, acknowledged to and before me that she executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this 27th day of February, 2001, in the aforesaid County and State.

NOTARY PUBLIC

My commission expires:

