604692

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July 21, 2025

LES W. BURKE * ROB BLUE, JR EDWARD A. HUTCHISON, JR. DOLGLAS L. SMITH + NEVIN J. ZIMMERMAN MICHAEL S. BURKE JOY A. MARLER** CLARK T. ROGERS, JR. NATALIE A. MCSWANE ** DAMELS, ROSENHEIM GREGORY J. PHILO TRISTAN LANASA MATT HUTT RICHARD A. SHANK II. GRAHAM CLARKE **・・・◆ SANDRA A, WILSON® CAROLINE LACOUR SMITH®

- OF COUNSEL
- * ALSO ADMITTED IN GEORGIA
- * CERTIFIED CIRCUIT COURT MIDIATOR
- OLLAN INTAXABOS
- *** CONTRRD FASILY MEDISTOR
- ♦ BOARD CERTIFIED MARIEM. & FAMILY LAW ATTORNEY ♦♦BOARD CLETTER DICTOR, COUNTY, AND LOCAL GOVERNMENT ATTORNEY

Division of Corporations Amendment Section Post Office Box 6327 Tallahassee, FL 32314

> Re: Burke Blue Hutchison Smith Zimmerman Burke & Masters, P.A. Name Amendment

Dear Sir/Mad'am:

Enclosed you will find our firm check in the amount of \$35.00 for a amendment request. We are requesting to amend our firm name and to change the name of one of our Shareholders, who is also our registered agent. Our document number is 604692. If you have any questions, please do not hesitate to contact our office. Thank you.

Very truly yours,

BURKE BLUE

τ

Douglas L. Smith

Enclosure(s): As stated.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: BURKE BLUE HI	JTCHISON SMITH ZIMM	MERMAN BURKE & MAST			
	NUMBER:		<u> </u>			
	rticles of Amendment and fee are su	bmitted for filing.				
Please return all	correspondence concerning this ma	tter to the following:				
	Douglas L Smith					
		Name of Contact Perso	n			
	BURKE BLUE HUTCHISO:	BURKE BLUE HUTCHISON SMITH ZIMMERMAN BURKE & MASTERS, P.A.				
		Firm/ Company				
	221 McKenzie Ave					
		Address	276			
	Panama City, Fl 32401					
		City/ State and Zip Cod	<u></u>			
	dsmith@burkeblue.com					
	-	sed for future annual report	notification)			
For further infor	mation concerning this matter, pleas	se call:				
Douglas L Smit	h	,850	769-1414			
	Name of Contact Person	at ()			
Enclosed is a ch	eck for the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing I	Fee □S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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	Ameno Divisio The C 2415	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

BURKE BLUE HUTCHISON SMITH ZIMMERMAN BURKE & MASTERS, P.A.

(<u>Name</u>	of Corporation as curr	ently filed with the Florida De	pt. of State)
604692			
	(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes,	this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation	<u>ı:</u>	
BURKE BLUE HUTCHISON SMITH 2	UMMERMAN BURKE	& MARLER, P.A.	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,"	Corp," "Inc." or "Co"	". A professional corporation	" or the abbreviation "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S			
			2025 TA
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)[]28
(, , , , , , , , , , , , , , , , , , ,			72
			eran eran
D. If amending the registered agent ar new registered agent and/or the ne			ame of the
Name of New Registered Agent	Joy A. Marler		
	221 McKenzie Ave		
	(Florid	la street address)	
New Registered Office Address:	Panama City		. Florida 32401
<u> </u>		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			ons of the position.
		_	
	Signature of Ne	ew Registered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed p	oursuant to 8. 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)

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	SD	Joy A Marler	221 McKenzie Ave
Add			Panama City, FL 32401
Remove			-
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary)	rticles, enter change(s) here: c). (Be specific)
	<u> </u>
-	
	<u></u>
-	
for amountment amount of the on one	values and extraction or paralletian of icenad charac
provisions for implementing the ar	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	menuncia il ilor containea ili che amenaticati riscit.
(9,	
<u> </u>	
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	adoption:	, if other than the
date this document was signed.		
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, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without sharehold	der action and shareholder
The amendment(s) was/were ac by the shareholders was/were:	dopted by the shareholders. The number of votes cast for the amen sufficient for approval.	dment(s)
	oproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	•	
O,	(voting group)	
Dated	1/21/25	
(By a select	director, president or other officer – if directors or officers have no ed, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	
	Douglas L. Smith	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	