605119

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OLVESION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	rion: Young, van	Assenderp &	Qualls,	P.A.
DOCUMENT NUMBER	R: <u>605119</u>			
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.		
Please return all correspon	ndence concerning this ma	tter to the following	ng:	
. <u>-</u>	Timothy R. Qualls			
		Name of Conta	act Person	
,	Young Qualls, P.A.			
-		Firm/ Con	npany	
	216 South Monroe	Street		
		Addre	SS	
	Tallahassee, Florida	a 32301		
		City/ State and	Zip Code	
<u>tqual</u>	Is@yvlaw.net E-mail address: (to be us	-16-6-	1	TIG WAY
	E-mail address: (to be us	sed for future annu	іаі героп і	notification)
For further information co	oncerning this matter, pleas	se call:		
Timothy R. Qua	lls	at (850	222-7206
Name of C	Contact Person		Area Cod	e & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	payable to the Flo	rida Depai	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	у	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendr Divisior P.O. Bo	e Address nent Section n of Corporations ox 6327 ssee, FL 32314		Division Clifton	Address nent Section n of Corporations Building tecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Young, van Assenderp & Qualls, P.A. (Name of Corporation as currently filed with the Florida Dept. of State)

605119



nt(s) to

	00011		•	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corporation adopts the	following amendme	
A. If amending name, enter the new nam	e of the corporation:			
Young Qualls, P.A.			The new	
name must be distinguishable and contai "Corp" "Inc.," or Co.," or the designati word "chartered," "professional associatio	ion "Corp," "Inc," or "C	o". A professional corporation nan	or the abbreviation	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		216 South Monroe Street		
		Tallahassee, Florida 32301		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Post Office Box 1833		
		Tallahassee, Florida 32302-1833		
D. If amending the registered agent and/new registered agent and/or the new r		ss in Florida, enter the name of the		
Traine of thew registered rigem	216 South Monr	oe Street		
_	(Florida stree	address)		
New Registered Office Address:	Tallahassee	, Florida	32301	
Her Registered Office Address.	(0	City)	(Zip Code)	
New Registered Agent's Signature, if chall hereby accept the appointment as registered.	nging Registered Agent:	City)		
	Signature of New Re	gistered 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.

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>	Name	Address		
1) Change	T	H. Kenza van Assenderp			
Add					
X Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add			·		
Remove					
5) Change	-				
Add					
Remove					
6) Change					
Add	-				
Remove					

N/A					
					. <u> </u>
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ın amendment pr	ovides for an exchange,	reclassification, or	cancellation of iss	sued shares,	
ovisions for imple (if not applicabl	menting the amendmen	<u>it if not contained i</u>	n the amendment	itself:	
	z, maicute N/A)				
N/A					
	· · · =		<u>-</u>	111111111111111111111111111111111111111	
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The date of each amendment(s) adoption: OCIODEF 1, 2010 date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
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	
☐ 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	
Signature	
(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)	
Timothy R. Qualls	
(Typed or printed name of person signing)	
Shareholder	
(Title of person signing)	