F050000003233

(Re	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	Treanor Architects, P.A.
	Name of Corporation
DOC	UMENT NUMBER: F05000003233
The e	nclosed Amendment and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Crissa	Nonken
	Name of Contact Person
Tream	orHL, P.A.
	Firm/Company
1040	Vermont Street
	Address
Lawre	nce, KS 66044
	City/State and Zip Code
	en@treanorhl.com
F	E-mail address: (to be used for future annual report notification)
For fu	orther information concerning this matter, please call:
Crissa	Nonken at () 842-4858 Name of Contact Person Area Code & Daytime Telephone Number
	Name of Contact Person Area Code & Daytime Telephone Number
Enclo	sed is a check for the following amount:
X	\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certificate Opy (Additional copy is enclosed) \$52.50 Filing Fee. Certificate of Status & Certificate Opy (Additional copy is enclosed)

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

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

(1-3 MUST BE COMPLETED)		The state of the s		
	F05000003233			
	(Document nu	umber of corporation (if known)		
Treanor Architects, P.A.			9.5	
• •	(Name of corporation as it app	pears on the records of the Department o	f State)	
2. Kansas		3 05/25/2005		
(Inc	orporated under laws of)	(Date authorized to	o do business in Florida)	
	(4-7 COMPLETE O	SECTION II NLY THE APPLICABLE CHANGES)		
	nanges the name of the corporation? 07/27/2016	oration, when was the change effect	cted under the laws of	
5. TreanorHL, P.A. (Name of corporation appropriate abbrev	on after the amendment, addition, if not contained in ne	ing suffix "corporation," "comparew name of the corporation)	ny," or "incorporated," or	
(If new name is unav business in Florida		rnate corporate name adopted for	the purpose of transacting	
6. If the amendment cl	nanges the period of duration	n, indicate new period of duration.		
		(New duration)	-	
7. If the amendment cl	nanges the jurisdiction of inc	corporation, indicate new jurisdicti	ion.	
	······································	(New jurisdiction)		
8. Attached is a certifi 90 days prior to deli having custody of c	cate or document of similar inverse of the application to the applicat	import, evidencing the amendmen e Department of State, by the Secreliction under the laws of which it i	t, authenticated not more than retary of State or other official is incorporated.	
Design	(Signature of a director of a receiver or other of a receiver or other of the company of the com	r, president or other officer - if in the han court appointed fiduciary, by that fiduciar President	ds ry)	
(Typed or p	printed name of person signing)		erson signing)	

AP 53-14

KANSAS SECRETARY OF STATE

Domestic For-Profit Corporation

Certificate of Amendment

Kansas Office of the Secretary of State:

Memorial Hall, 1st Floor 120 S.W. 10th Avenue Topeka, KS 66612-1594 (785) 296-4564 kssos@sos.ks.gov www.sos.ks.gov 3576 01 FILED BY KS 50S 053 014 07-27-2016 \$35.00 1 01:49:21 PM FILE*: 2246833

This form must be complete and accompanied by the correct filling fee or the document will not be accepted for filling.

1. Business entity ID number

Not Federal Employer ID Number (FEIN).

2246833

Must match name on record with Secretary of State.

Treanor Architects, P.A.

The articles of incorporation are amended as follows:
 The name of the Corporation is hereby amended to read as follows: TreanorHL, P.A.

4. The amendment was duly adopted in accordance with the provisions of K.S.A. 17-2709(a) or 17-6602.

5. Future Effective date

Must be within 90 days of filing the filing date.

Month Day Year

Year

6. I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct, and that I have remitted the required fee.

Signature Authorized Officer

X

R. Resu

R. Rowe, President

Daniel

(785) 842-4858

2016

Day 8

Month

Landon State Office Building 900 S.W. Jackson St., Suite 507 Topeka, KS 66612-1257



Phone: (785) 296-3053 Fax: (785) 296-0167 www.ksbtp.ks.gov

Shelby L. Lopez, Executive Director

Sam Brownback, Governor

August 24, 2016

CERTIFICATE

I, Shelby Lopez, Executive Director of the Kansas State Board of Technical Professions, do hereby certify that:

TreanorHL PA
Professional Architect Facility License A-216
Expiration Date: 12/31/2017

is fully licensed in this state to practice a technical profession and is in good standing with the Board.

BOARD OF TECHNICAL PROFESSIONS

Shelby Lopez

Executive Director

Shelpy Ropey



