## Y7A259

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	<del></del>
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

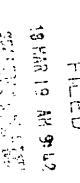
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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CHARLAN, BRO	CK & ASSOCIATES, INC	·	
DOCUMENT NUMB				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	CHARLES H. STARK, ESQ	).		
-		Name of Contact Person	1	
	CHARLES H. STARK, P.A.			
-		Firm/ Company		
	312 N. PARK AVE., SUITE	2-A		
-	· · · · · · · · · · · · · · · · · · ·	Address		
	WINTER PARK, FL 32789			
•	<del></del>	City/ State and Zip Cod	e	
ANNI	JALREPORT@ATTORNEY	STARK.COM	<b>√</b>	
	<del>-</del>	sed for future annual report		
For further information	concerning this matter, pleas			
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number	
	the following amount made		,	
■ \$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)	
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		

## Articles of Amendment to Articles of Incorporation of

CHARLAN.	BROCK &	ASSOCIATES.	INC.

CHARLAN, BROCK & ASSOCIATES, INC.	
(Name of Corporatio	n as currently filed with the Florida Dept. of State)
F29259	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	rporation:
N/A	
	The new discorporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
•	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	
	<u>ं के</u>
C. Enter new mailing address, if applicable:	N/A N/A
(Mailing address <u>MAY BE A POST OFFICE BON</u>	
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
new registered agent and/or the new registered of	
N/A	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address: N/A	Dhaida
New Registered Office Address.	, Florida
New Registered Agent's Signature, if changing Regi	stered Agent:
	I am familiar with and accept the obligations of the position.
Signa	ture 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 udditional 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 Do	<u>se</u>	
X Remove	$\underline{V}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) N/A Change				
Add				<u> </u>
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add	•	<del></del>		
Remove				
Kemove				
6) Change	-	_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
CHANGE THE NUMBER OF AUTHORIZED SHARES OF COMMON CAPITAL STOCK TO 10,000 SHARES.
ALL WITH NO PAR VALUE.
<u> </u>
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) N/A
N/A

The date of each amendment(s) adop	otion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocdocument's effective date on the Depa	ck does not meet the applicable statutory filing requirements, the rtment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders was/were sufficiently.	ed by the shareholders. The number of votes cast for the amendment for approval.	nent(s)
	ved by the shareholders through voting groups. The following stach 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	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	ed by the board of directors without shareholder action and sharel	holder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholde	<b>≧</b> r
DatedSignature	15/2018 July	
selected. 1	ctor, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
• •	HARLES L. CHARLAN	
	(Typed or printed name of person signing)	
PI	RESIDENT	
_	(Title of person signing)	