

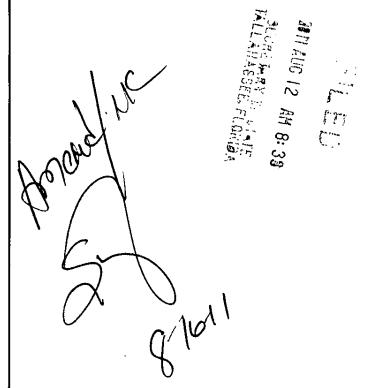
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COVER LETTER

TO: Amendment Section Division of Corporations

ú

NAME OF COR	PORATION:	Stiles, Taylor & Gr	ace, P.A.
DOCUMENT NU	JMBER:		
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Mary Ann Stiles	
	1	Name of Contact Person	
	s	itiles & Grace, P.A.	
		Firm/ Company	
	315	South Plant Avenue	
		Address	
		mpa, Florida, 33606	
	(City/ State and Zip Code	
		@stileslawfirm.com ed for future annual report notific	cation)
For further inform	ation concerning this matter,	, please call:	
Ŋ	Mary Ann Stiles	at (813)	251-2880
	of Contact Person	at (<u>813</u>) Area Code & Day	time Telephone Number
Enclosed is a chec	k for the following amount r	nade payable to the Florida	Department of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is end	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations 327	Street Address Amendment Section Division of Corporati Clifton Building	
Tallahasse	e, FL 32314	2661 Executive Cente	er Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

Stiles, Taylor & Grace, P.A.

MITAUG 12 AM 8:30 (Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

Stile	es & Grace, P.A.	The 1
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pi	the word "corporation," "company," on the word "corporation," "company," on the word "corp," "Inc," or "Co".	or "incorporated" or A professional corpora
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFF</u>	ICE BOX)	
	registered office address in Florida, ente	r the name of the
D. If amending the registered agent and/or	registered office address in Florida, ente	r the name of the
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, ente	r the name of the
D. If amending the registered agent and/or new registered agent and/or the new reg Name of New Registered Agent:	registered office address in Florida, ente istered office address: (Florida street address)	r the name of the The state of

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
DVP	Rayford H. Taylor	3355 Lenox Rd Suite 600 Atlanta, Georgia, 30326	
		-	
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
provisio		ge, reclassification, or cancellation of ent if not contained in the amendme	

The date of each amendmen	t(s) adoption: August 8, 2011
Effective date if applicable:	August 8, 2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemen ed 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	,,,
- ,	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated	8/8/11
Signatu r e_	Mky An Sala
•	a director, president or other officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Mary Ann Stiles
	(Typed or printed name of person signing)
	President and CEO
	(Title of person signing)