G77540

| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE FALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: EVELYN NOEL I | NC. P.A. | | |
|---------------------------|---|--|---|--|
| DOCUMENT NUMB | G77540 | | | |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing. | | |
| Please return all corresp | ondence concerning this ma | tter to the following: | | |
| | JESSICA MEDEIROS | | | |
| - | · | Name of Contact Person | 1 | |
| 1 | EVELYN NOEL ACCOUNTING | | | |
| - | | Firm/ Company | | |
| : | 3711 TROUT RIVER BLVD |) | | |
| _ | | Address | | |
| | JACKSONVILLE FL 32208 | | | |
| - | | City/ State and Zip Code | C | ~2 |
| | | | | SEC SEC |
| - | F-mail address: (to be us | sed for future annual report | notification) | 产业 是 |
| | is indicated to be in | ou ioi iutui e umiuui topoit | | 6 28 |
| For further information | concerning this matter, pleas | se call: | | PRI NIG 28 MI ID: 1-8 SECRETANY SEED, FL |
| | | | | 自然もつ |
| JESSICA MEDEIROS | | at (| 768-6486) | _ 79 9 |
| Name of | f Contact Person | Area Co | de & Daytime Telephone Number | PH to |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: | Lu Lu |
| S35 Fiting Fee | ☐\$43.75 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) | |
| Amer Divis P.O. | ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314 | Amend Divisio The C 2415 i | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 | |

Articles of Amendment to Articles of Incorporation of

EVELYN NOEL INC. P. A.

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

| (Name of Corpor | ration as currently filed with the Florida Dept. of State) |
|--|--|
| 977540 | |
| (Do | ocument Number of Corporation (if known) |
| ursuant to the provisions of section 607.1006, Flo s Articles of Incorporation: | orida Statutes, this Florida Profit Corporation adopts the following amendment(s) |
| . If amending name, enter the new name of th | ne corporation: |
| | The new |
| | d "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc," or "Co". A professional corporation name must contain the word bbreviation "P.A." |
| . Enter new principal office address, if applica Principal office address <u>MUST BE A STREET</u> A | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | (BOX) |
| | cistered office address in Florida, enter the name of the cred office address: (Florida street address) |
| | |
| If amending the registered agent and/or registered agent and/or the new register | istered office address in Florida, enter the name of the |
| | Ted onice address. |
| Name of New Registered Agent | |
| | (Florida street address) |
| | (Piorita street dataress) |
| | |
| New Registered Office Address: | , Florida |

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 | VP | JESSICA MEDEIROS | 9970 FRANKELLA ROAD |
| X Add | | | JACKSONVILLE, FL 32208 |
| Remove | | | |
| 2) Change | | | _ |
| Add | | | |
| Remove 3) Change | | | SECKETALLINA |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | 28 MIO: 48 |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | · · · · · · · · · · · · · · · · · · · |
| 6) Change | | - | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Artic (Attach additional sheets, if necessary). | (Be specific) | | | |
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| provisions for implementing the ame | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: | (A) | | ί. |
| (if not applicable, indicate N/A) | | in c | | |
| , | | HORETAKY OF SEE, FL | TE O | |
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| (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 will not be listed as the document's effective date on the Department of State's records. | | 08/26/2024 | |
|--|---------------------------------------|--|---|
| **Signature** **Sign | | | , if other than the |
| (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 will not be listed as the locument's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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 (voting group) Dated 8/24/2024 Signature (s) an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | une coodinant mas arginos. | | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records. **Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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 | Effective date <u>if applicable</u> : | | |
| CHECK ONE | | (no more than 90 days after amendment file date) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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 | | | ll not be listed as the |
| action was not required. 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 | Adoption of Amendment(s) | (CHECK ONE) | |
| 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 | | e adopted by the incorporators, or board of directors without shareholder action and | d shareholder |
| "The number of votes cast for the amendment(s) was/were sufficient for approval by | | | |
| Signature Lieby Med (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) | | | |
| Signature Line Med Med Med Med Med Med Med Med Med Me | "The number of votes | cast for the amendment(s) was/were sufficient for approval | |
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| Signature Live Med (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) | | (voting group) | |
| Signature Live Med (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) | Dated <i>\$/2</i> | 14/2024 | |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | | / | _ |
| appointed fiduciary by that fiduciary) | | | |
| Evelya Now! (Typed or printed name of person signing) President (Title of person signing) (Title of person signing) Evelya Now! (Typed or printed name of person signing) AH 10: 48 | | | |
| Evely Now! (Typed or printed name of person signing) President (Title of person signing) Example 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | 202 202 |
| (Typed or printed name of person signing) Passolut (Title of person signing) (Title of person signing) | | Evelyn Nay | 크유 💆 🗝 |
| Pasiolat (Title of person signing) Pasiolat (Title of person signing) Pasiolat (Title of person signing) | | (Typed or printed name of person signing) | |
| (Title of person signing) (Title of person signing) (Title of person signing) | | Parish 1 | 77. A.H.F. |
| TEE, FL | | (Title of person signing) | |
| E. FL STATE | | (The or person signing) | 一部分・三十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二 |
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