H22034

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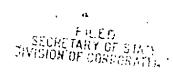


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SECRETARY OF STATE
JYSSION OF CORPORATIONS

Mr. 18. July



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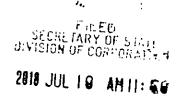
2018 JUL 19 AM 11: 58

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	Publi	c Accountai	nt, P.A.
DOCUMENT NUMB				
	f Amendment and fee are su	bmitted for fili	ng.	
Please return all corresp	ondence concerning this ma	tter to the follo	wing:	
J	effrey Hahn, CPA			
_		Name of Co	ontact Persor	1
	leffrey B. Hahn, CPA, PA			
_		Firm/ C	Company	
F	P.O Box 27-6310			
-		Ad	dress	
E	Boca Raton, FL 33427			
_		City/ State :	and Zip Code	2
.leff@l	HahnGlickcpa.com			
	E-mail address: (to be us	ed for future a	nnual renort	notification)
	i individual (io oc ac			,
For further information	concerning this matter, pleas	se call;		
Jeffrey Hahn		at (561	394-0708 de & Daytime Telephone Number
Name of	Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the	Florida Depa	urtment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ((Additiona enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Jeffrey B. Hahn Certified Public Accountant, P.A.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)		
H22034				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s):		
A. If amending name, enter the new na	ime of the corporation:			
Hahn & Glick CPAs, P.A.		The new		
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:		6853 SW 18th Street, Suite M320		
(Principal office address MUST BE A S		Boca Raton, FL 33433		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO Box 27-6310		
		Boca Raton, FL 33427		
D. If amending the registered agent ar new registered agent and/or the new registered agent are new registered.				
Name of New Registered Agent	Jeffrey Hahn			
<u>Name of New Registered Agent</u>	6853 SW 18th Street,	Suite M320		
		treet address)		
N. D	Boca Raton	. Florida		
New Registered Office Address:		(City) (Zip Code)		
New Registered Agent's Signature, if c		nt: r with and accept the obligations of the position.		
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0		
		S & W		
	Signature of Non	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 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)	Title	Name		<u>Addres</u> s	
1) Change				 *****	
Add					
Remove					
2) Change					
Add			_		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add				 	
Remove					
5) Change					
Add					
Remove					·
6) Change					
Add		_ 	•		
Remove					

Much additional sheets, if necessary).). (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
		
		
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
ν, του της του		

•	July 1, 2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
	1, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendme ifficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareho	older
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	7/2/18	
× **********	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
(By a d	lirector, president or other officer - if directors or officers have not be	
	d, by an incorporator – if in the hands of a receiver, trustee, or other c	ourt
appoin	nted fiduciary by that fiduciary)	
	JEFFREY HAHN	
	(Typed or printed name of person signing)	
	PRES.	
	(Title of person signing)	