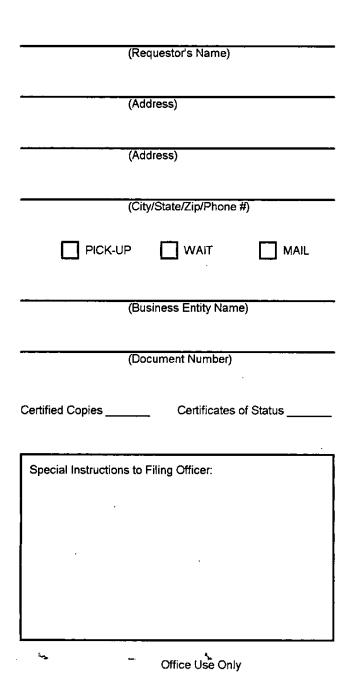
H46775





600263664546

09/19/14--01011--017 **35.00

SEERLIAR OF SIATE OF VICTORS OF STATE OF CORPORATIONS

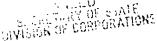
Clevis 4

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are sa	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
11360 N. a	Name of Contact Person PRIMER P.A. Firm/ Company Address Gardens, At 64 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
FREMAN BARNER	at (56/) 296-777/ Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	payable to the Florida Department of State:				
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 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



Articles of Incorporation of

14 SEP 19 PM 1:16

FREEMAN BARNER & ASOCIALS	P.A. 14 SEP 19 PH 1. 10
(Name of Corporation as currently filed with the Flo	· · · · · · · · · · · · · · · · · · ·
(Document Number of Corporation (if	known
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
BARNER & BARNER, P.A. name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	ss in Florida, enter the name of the
Name of New Registerett Agent	
(Florida stree	et address)
New Registered Office Address: N/A	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Registered Ag	ent, 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)

Piease 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 manney. 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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add Remove			
2) Change			
Add			
Remove 3) Change			
3) Change Add		_	
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add Remove			

amending or adding additional Artication and additional sheets, if necessary).	(Be specific)
WHILL	
788 to - (1975 7 0 1986 M	

	·

nu.	
an amandment usasidas for an araka	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amen	adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	·

The date of each amendment(s) adoption: date this document was signed.	Some har OF siAIE HVIOLEN OF SIRPORATIONS
Effective date if applicable: (no more than 90 days after	14 SEP 19 PM 1: 16 amendment file date:
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of very by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient f	or approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting group)	
The amendment(s) was/were adopted by the board of directors without shar action was not required. The amendment(s) was/were adopted by the incorporators without sharehold.	
action was not required.	uet action and shareholder
Dated <u>September 11, 2014</u>	
Signature AB	
(By a director, president or other officer - if direct	
selected, by an incorporator — if in the hands of a rappointed fiduciary by that fiduciary)	receiver, trustee, or other court
FREEMAN W. BAR	NER
(Typed or printed name	of person signing)
Purificat	

(Title of person signing)