## H62425

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(Document Number)				
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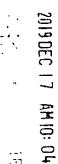
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## **COYER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TECHLER AND	ASSOCIATES, INC.			
DOCUMENT NUMB	ER: H62425				
	of Amendment and fee are su	abmitted for filing.			
Please return all corres	pondence concerning this ma	ntter to the following:			
	Jerrold E. Slutzky				
-	Name of Contact Person				
	Shutzky Law Firm				
-		Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	853 Main Street, Suite A				
-	Address				
:	Safety Harbor, FL 34695				
<del>-</del>		City/ State and Zip Cod	<del></del>		
Jerrysl	uLaw@gmail.com				
	<del>=</del> =	sed for future annual report	notification)		
For further information  Jerrold E. Słutzky	concerning this matter, plea		475 (200		
	f Contact Person	at (	de & Daytime Telephone Number		
Name o	t Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

TECHLER AND ASSOCIATES INC.

TECHLER AND ASSOCIATES, INC.				
( <u>Name</u>	of Corporation as current	ly filed with the Florida Dep	ot. of State)	
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation a	dopts the following amendu	ient(s) to
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "( "chartered," "professional association,	Corp," "Inc," or "Co"	A professional corporation i		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		77 Van Ness, Unit 608		
		San Francisco, CA 94102		
			2019	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		77 Van Ness, Unit 608	DEC 1	0 T
<del></del>		San Francisco, CA 94102	• -1	· · · · · · · · · · · · · · · · · · ·
			ome of the	
D. If amending the registered agent at	nd/or registered office add	Iress in Florida, enter the na	ime of the	•
new registered agent and/or the ne	Jerrold E. Slutzky	<u>ss:</u>		
Name of New Registered Agent	853 Main Street, Suite A			
	(Florida st	treet address)		
New Registered Office Address:	Sufety Harbor		Florida 34695	
		(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 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

Example:	n e, ana san	iy Smin, 3v-as an Aaa.		
X Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	PTSD	Mark J. Techler	2060 34th Way	
Add			Largo, FL 33771	
Remove				
2) Change	PTSD	Melinda R. Techler	77 Van Ness, Unit 608	
Add			San Francisco, CA 94102	
Remove 3) Change		_		
Add				
Remove				
4) Change	<del>-7.</del>		<u> </u>	
Add				
Remove				
5) Change			<u> </u>	
Add				
Remove				
б) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or add	ding additio	onal Articles, enter change(s) here:		

۲.	If amending or adding additional A	Articles, e	nter change(	s) here:
	(Attach additional sheets, if necessors			

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	···
	-
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
N/A	
	<del></del>
Page 3 of 4	
1 age 2 01 4	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	, a once man the
Effective date if applicable:	
(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.

Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. Tent for approval.	The number of votes cast for the amendment(s)
		hrough voting groups. The following statement to vote separately on the amendment(s):
"The number of votes cast for t	he amendment(s) was/v	vere sufficient for approval
by		
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directo	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators w	rithout shareholder action and shareholder
DatedSeptember 27, 1	2019	
Signature <u>7/1 R</u> 2	Teclos_	Ticer – if directors or officers have not been
(By a direct selected, by	or, president or other of	the hands of a receiver, trustee, or other court
Mel	inda R. Techler	
<del></del>	(Typed or printe	ed name of person signing)
Pres	sident	
(Tit	e of person signing)	