## J07805

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## **COVER LETTER**

FO: Amendment Section Division of Corporations	·	••	
NAME OF CORPORATION: _	How	ard w Petr	ick CPA PA
DOCUMENT NUMBER:		507905	<i></i>
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.	
Please return all correspondence o	oncerning this ma	tter to the following:	
	H	Name of Contact Persor	atrià
<del></del>	<del></del> .	Firm/ Company	
		1) NW ZS	Street
	<u> </u>	City/ State and Zip Code	Street FL 32605-3740
E-mai			+ @ gmail, com
For further information concernin	g this matter, plea:	se call:	
Howard W	Carrick	at(_3.52	de & Daytime Telephone Number
Name of Contact I	'erson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made	payable to the Florida Depa	artment of State:
X \$35 Filing Fee □\$43 Cert	.75 Filing Fee & ifficate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se			Address Iment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to	O
Articles of Incorporation	
Howard W Patricle CPA PA. 14 AMII:	52
(Name of Corporation as currently filed with the Florida Dept. of State) INNY OF STATES	
<u> </u>	<del></del>
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendments Articles of Incorporation:	ent(s) to
A. If amending name, enter the new name of the corporation:	
Howard II Patrick Inc The new	μ
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	I
B. Enter new principal office address, if applicable: 2211 NW 28 Street	
(Principal office address MUST BE A STREET ADDRESS)	5-3740
<u> 12 = (1                                </u>	- , , , , , , ,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  2211 NW 28 Street	
	C 201
Conestille Fl 3260	1 -5 12
D. 16 C.	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent Howard W Pat (15)	
2211 NW 28 Street  (Florida street address)	
	2712
New Registered Office Address: (SUNCS/1) - Florida 32605 (City) (Zip Code)	3 190
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with arid accept the obligations of the position.	
$\sim 1/\sqrt{1+1}$	
Shipped Malrih	
Signature of New Hegistered Agent, if changing	
Check if applicable	

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

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.

X Change	<u>PT</u>	John Doe					
X Remove	<u>v</u>	Mike Jon	<u>es</u>	/ 1/9			
X Add	<u>sv</u>	Sally Sm	i <u>th</u>				
Type of Action (Check One)	<u>Title</u>	]	Name		£	Address	
1) Change						···	
Add					_		
Remove					-		
2) Change			<del></del>				
Add					_		
Remove 3) Change					_		
Add					_		
Remove					_		
4) Change					. <u> </u>		
Add					_		
Remove					_		
5) Change							
Add					-		
Remove					_		
6) Change					- <del>-</del>	·	
Add					_		
Remove					_		

ch additional sheets, if necessary). (Be specific)	
	-
	·. ·
	<del> </del>
	<del></del>
the state of the s	
n amendment provides for an exchange, reclassification, or cancellation of issued shares ovisions for implementing the amendment if not contained in the amendment itself:	'[Ma]
(if not applicable, indicate N/A)	
	_
	···

•

The date of each amendment(s) adoption: date this document was signed.	June	17 2022	, if other than the
Effective date if applicable:	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St		statutory filing requirements, this	s date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)		
☐ The amendment(s) was/were adopted by the in- action was not required.	corporators, or board of	of directors without shareholder a	action and sharcholder
The amendment(s) was/were adopted by the short by the shareholders was/were sufficient for ap		ber of votes cast for the amendme	ent(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting gr			tement
"The number of votes cast for the amend	ment(s) was/were suff	ficient for approval	
by		. · ·	
(voting	g group)	1	
Dated	17,2022	- Immand w	Trill.
	orator – if in the hand	f directors or officers have not be ds of a receiver, trustee, or other of	
	yped or printed name of	W Pott	
(Ti	itle of person signing)	<i>m</i> !	