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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CAREY, O'MAI	LLEY, WHITAKET	LY MUELLER, P.A.
DOCUMENT NUMBER: <u>U23198</u>		
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
KELLY CAPEY	Name of Contact Person	
<u>CAPEY, D'MALLEY</u>	/ WHITAKER & M Firm/Company	WELLEP, P.A.
712 S. OPEGOI		
TAMPA, FL 3	3(ρΟ (ρ City/ State and Zip Code	
E-mail address: (to be use	PA . COV ) ed for future annual report	notification)
For further information concerning this matter, please    KELLY CAPEY     Name of Contact Person	at ( <b>813</b>	_) <u>250 - 0577</u> de & Daytime Telephone Number
Enclosed is a check for the following amount made p		·
\$35 Filing Fee \$\text{Certificate 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	RAMUELLER, P. FI	1	
(Name of Corporation	as currently filed with the Fl	orida Dept. of State)	
J23 198			
(Docume	nt Number of Corporation (if kr	own)	
rsuant to the provisions of section 607.1006, Florida 5 Articles of Incorporation:	Statutes, this Florida Profit Cor	poration adopts the follow	ving amendment(s)
If amending name, enter the new name of the cor	poration:		
MPEY, O'MAUEY, WHITAKER, MUEUER, me must be distinguishable and contain the word forp.," "Inc.," or Co.," or the designation "Corp.," or d"chartered." "professional association," or the ai	"Inc," or "Co". A profession	7 . r "incorporated" or the nal corporation name mu	The new abbreviation st contain the
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDR</u>	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	)		_
If amending the registered agent and/or registered new registered agent and/or the new registered of  Name of New Registered Agent		er the name of the	
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(2	ip Code)
			•

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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	SV Sall	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	DVP_	HARDY L. POBERTS, III	712 S. OPEGON AUENME
X Add			TAMPA, FL 33006
Remove			
2) Change	DVP_	MAPK A.SMITH	712 S. OPEGON AVENUE
_X_ Add			TAMPA, FL 33 GOU
Remove			
3) Change			
Add			
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
Kemove			

(Attach addition	adding additional Artical sheets, if necessary).	(Be specific)			
-					
provisions for	nt provides for an exch implementing the amer licable, indicate N/A)	ange, reclassifica adment if not con	tion, or cancellatio tained in the amen	n of issued shares, dment itself:	
			··· ·		

	, if other than the
date this document was signed.	
Effective date if applicable: FEBRUARY 1, 2017	• •
(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 necessarily document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1/27/17	
Dated 1/27/17 Signature Muchael 77. Carey	
(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)	
Michael P. Carcy (Typed or printed name of person signing)	
(1 yped of printed fiame of person signing)	
Treasurer (Title of person signing)	<del></del>
(Title of person signing)	