J14010

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A. Butler

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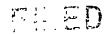
TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LULICH ATTORN	NEYS & CONSULTANTS	, P.A.		
DOCUMENT NUM		<u></u>			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Steven Lulich				
		Name of Contact Person	1		
	Lulich & Attorneys				
		Firm/ Company			
	1069 Main Street				
		Address			
	Sebastian, FL 32958				
	City/ State and Zip Code				
	jordan@lulich.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	ion concerning this matter, pleas	se call:			
Steven Lulich		at (772) 589-5500 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	artment of State:		
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ailing Address		Address		
	nendment Section vision of Corporations	Amendment Section Division of Corporations			
	O Roy 6327	The Centre of Tallahassee			

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of



LULICH ATTORNEYS & CONSULTANTS, P.A.

(Name of Corporation a	as currently filed	with the Florida Der	ot. of Stafe) !	PF12: 1:1
J74010				r of STATE
(Document	Number of Corpo	oration (if known)		CEE.FL
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	atutes, this <i>Floride</i>	a Profit Corporation :	adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corpo	oration:			
LULICH & ATTORNEYS, P.A.				The new
name must be distinguishable and contain the word "corpo" "Inc.," or Co.," or the designation "Corp." "Inc," or "chartered," "professional association," or the abbrevial	r "Co". A profe	iy," or "incorporated essional corporation	" or the abbreviation name must contail	_ эн "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE				
Tracipal affice address MOST DE A STREET ADDRE	<u></u>)			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		Florida, enter the na	ame of the	
Name of New Registered Agent				_
	(Florida street add	ress)		-
New Registered Office Address:			, Florida	
	(City)		(Zip (Code)
New Registered Agent's Signature, if changing Registe	ered Agent:			
I hereby accept the appointment as registered agent. I ar		d accept the obligatio	ons of the position.	
Signatur	e of New Register	ed 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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	VD	Jordan Lulich	1069 Main Street
Add			Sebastian, FL 32958
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
	
-	
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provisions for implementing the am	change, reclassification, or cancellation of issued shares, tendment 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.	tion:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendmen	n file date)
Note: If the date inserted in this blocdocument's effective date on the Depart	k does not meet the applicable statutory filing retiment of State's records.	equirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes east cient for approval.	for the amendment(s)
	red by the shareholders through voting groups. The ch voting group entitled to vote separately on the	
"The number of votes east for	the amendment(s) was/were sufficient for approv	val
by		"
	(voting group)	
August 25, 20. Dated	MM	
selected, b	tor, president or other officer – it directors or offi y an incorporator – if in the hands of a receiver, t fiduciary by that fiduciary)	
Sto	even Lulich	
- .	(Typed or printed name of person signing	<u>i</u>)
Pro	esident	

(Title of person signing)