## J92835

Office Use Only



600402722746

02/16/23--01011--008 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: YOUNG & BROO	KS, P.A.		
DOCUMENT NUMB				
	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
:	STUART A. YOUNG			
-		Name of Contact Person	1	
,	YOUNG & BROOKS, P.A.			
-		Firm/ Company		
	1860 FOREST HILL BLVD.	, STE 201		
-	-	Address		
,	WEST PALM BEACH, FL	33406		
-	·	City/ State and Zip Code	<del></del>	
;	SYOUNG@YBPLAW.COM			
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
STUART A YOUNG		at (at (	)	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
X \$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)	
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ussee, FL 32303	

## Articles of Amendment Articles of Incorporation of



## (Name of Corporation as currently filed with the Florida Dept. of State)

t(s) to

YOUNG & BROOKS, P.A.	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpo	ration:
LAW OFFICE OF STUART A. YOUNG, P.A.	The nev
	ration," "company," or "incorporated" or the abbreviation "Corp., "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	ss) NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered new registered agent and/or the new registered office	
Name of New Registered Agent	NIA
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	red Agent:
I hereby accept the appointment as registered agent. I an	s familiar with and accept the obligations of the position.
Signature	e of New Registered Agent, if changing
51	

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)

Example:

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 Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change	S	ELLIOT R. BROOKS	1860 FOREST HILL BLVD.
Add			STE. 201
X Remove			WEST PALM BEACH, FL 33406
2) Change		<u> </u>	
Add			
Remove 3) Change			
<b>Ad</b> d			
Remove			
4) Change			
Add			-
Remove			****
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove		•	

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
· · · · ·	
	<del> </del>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indifferent if not contained in the amendment riser.
· · ·	
1	
NIA	
NIA	
NIA	
NIA	
NJA	
NIA	
NJA	
NIA	
NIA	

•

	NIA	
The date of each amendment(s) adopt	lon:	, if other than the
date this document was signed.	ΝİA	
Effective date if applicable:	<i>∧1</i> / <del>1</del>	
	(no more than 90 days after amen	lment file date)
Note: If the date inserted in this block document's effective date on the Depart		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes ent for approval.	cast for the amendment(s)
	d by the shareholders through voting group woting group entitled to vote separately on	
"The number of votes cast for t	he amendment(s) was/were sufficient for ap	pproval
by		.11
•	(voting group)	
Dated	127/2933 101/5	<del></del>
selected, by	or, president or other officer – if directors of an incorporator – if in the hands of a received duciated by that fiduciary)	
	Skuart A.	Your
	Typed or printed name of person significant	ining)
<del>-</del>	(Title of person signing)	

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