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SECRETARY OF STATE
AREASSEE FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Squire Smith, P.A.	
DOCUMENT NUMBER:	J94610	<b>.</b>
The enclosed Articles of Amendment and f	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Char	es C (Squire )Smith	
(N	ame of Contact Person)	-
Cha	arles C Smith, P.A.	
<del></del>	(Firm/ Company)	*
	P.O. Box 811	
	(Address)	r -,
	ter Haven, FL 33882 ty/ State and Zip Code)	
For further information concerning this man		
Charles C. (Squire) Smith	at ( 863 ) 559-0307	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	. 3
Enclosed is a check for the following amou	nt:	
□\$35 Filing Fee  □\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	š
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle	

Tallahassee, FL 32301



January 11, 2006

CHARLES C (SQUIRE) SMITH P.O. BOX 811 WINTER HAVEN, FL 33882

SUBJECT: SQUIRE SMITH, P.A.

Ref. Number: J94610

We have received your document for SQUIRE SMITH, P.A. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Letter Number: 006A00002081

Tracy Smith Document Specialist

## Articles of Amendment to Articles of Incorporation of

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## Squire Smith, M.A. (Name of corporation as currently filed with the Florida Dept. of State AHASSEE FLORIDA J94610 (Document number of corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: **NEW CORPORATE NAME (if changing):** (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) None

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

 	N/A	
		 · · · · · · · · · · · · · · · · · ·

(continued)

The date of each amendmen	12 BILOS	
Effective date if applicable:	N/A	•
Effective date if applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	was/were approved by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for
, ,	was/were approved by the shareholders through voting go to must be separately provided for each voting group entitle numendment(s):	-
"The number o	of votes cast for the amendment(s) was/were sufficient for	approval by
	(voting group)	
	was/were adopted by the board of directors without share tion was not required.	holder action
The amendment(s) shareholder action	was/were adopted by the incorporators without sharehold was not required.	er action and
selec	director, president or other officer if directors or officers have not be cited, by an incorporator - if in the hands of a receiver, trustee, or other binted fiduciary by that fiduciary)	
	Charles C Smith	
<del></del>	(Typed or printed name of person signing)	
	Owner/ President	
	(Title of person signing)	_

FILING FEE: \$35