K50378

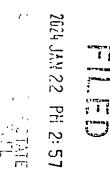
(1	Requestor's Name)			
- (/	Address)			
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((City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(1)	Business Entity Name)			
])	Document Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				





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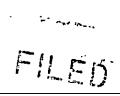


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Garbett, Allen & Ro	oza, P.A.	
DOCUMENT NUMI			
	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	Gustavo Oliva		
		Name of Contact Persor	1
	Garbett, Allen & Roza, P.A.		
		Firm/ Company	
	80 SW 8th Street, Suite 3100		
		Address	
	Miami, FL 33130		
		City/ State and Zip Code	2
	goliva@garlawfirm.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio Gustavo Oliva	n concerning this matter, pleas		579-0012
	of Contact Person	at (Area Coo) 579-0012 de & Daytime Telephone Number
	r the following amount made p		
S35 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



Garbett, Allen & Roza, P.A.

(<u>Name of Corporation as currently fil</u> e K50378	ed with the Florida Dept.	W. Ziate) 1 55	Ры с -
K50378			17 2:57
(Document Number of Co	poration (if known)	- - - · · · · · · · · · · · · · · · · · ·	_ U 7/5#
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	da Profit Corporation add	opts the following	g amendment(s
A. If amending name, enter the new name of the corporation:			
Garbett, Allen, Roza & Yates, P.A.			The new
name must be distinguishable and contain the word "corporation," "comp "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro "chartered," "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	<u>.</u>		
-			
_			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
_			
_			
D. If amending the registered agent and/or registered office address	n Florida, enter the nam	ie of the	
new registered agent and/or the new registered office address:			
Name of New Registered Agent			-
			_
(Florida street ac	(dress)		
New Registered Office Address:	 ·	Florida	
(City	1	(Zip C	Code)
Sew Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent. I am familiar with a	ind accept the obligations	of the position.	
Signature of New Regist	ered 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)

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	al sheets, if necessa	ary). (Be specific)			
•					-
		 			
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				ion of in und charge	
	nt nauvidou foa oa	avahanaa raalassifi			
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, , , , ,

• •	January 1, 2024	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this deartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adoption was not required.	nted by the incorporators, or board of directors without shareholder act	ion and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment ficient for approval.	(2)
	oved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	,,	
,	(voting group)	
January 16, 1 Dated Signature (By a die	ector president or other officer – if directors or officers have not been	
selected	hydran incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	
1	Frank J. Roza	
-	(Typed or printed name of person signing)	
9	Secretary and Director	
-	(Title of person signing)	