K57718

(Re	questor's Name)	
(Ad	dress)	
(A d	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
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Amend

AUG 2 2 2012 T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: MARC S C	OHEN ASSOCI	ATES INC	
DOCUMENT NUMB	ER: K57718			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
	DEBORAH COH	EN		
-	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n	
-		Firm/ Company		
•	4219 TARGEE A	VE		
-		Address		
	NORTH PORT, FL 34287			
-		City/ State and Zip Cod	e	
MAI	RCSCOHEN@AG	DL.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
RICHARD C	POLLOCK	at (954	726-2537	
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:	
S35 Filing Fee	☐\$43.75 Filing Fee & 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		Street Address Amendment Section Division of Corporations Clifton Building		
Tollohassee Fi 37314		2661 F	vecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MARC S. COHEN ASSOCIATES, INC.

(Name of Corporation as currently K57718	y filed with the Florida I	Dept. of State)		
	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida</i>	Profit Corporation adop	ots the following a	mendment(s) to
A. If amending name, enter the new name of the	corporation:			
				he new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A			
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				
	<u></u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	ROY)			
(maining dudiess MAI BEAT OST OFFICE I	<u></u>			
D. If amending the registered agent and/or registered agent and/or the new registered		lorida, enter the name	of the	
Name of New Registered Agent				
Name of New Registered Agent				
	(Florida street addre	ess)		
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registered agen		accept the obligations of	of the position.	
	(A)	<u> </u>		
Signature of	f New Registered Agent, if	changing		

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	<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)	Title		Name	Address
I) Change		_		
Add				
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 Artic (Attach additional sheets, if necessary).	(Be specific)
	
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- <u></u>	
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself;
HE PURPOSE OF THIS	AMENDMENT IS TO NOTE THAT
MARC S COHEN IS 10%	SHAREHOLDER AND
EBORAH HAYWOOD C	OHEN IS 90% SHAREHOLDER.

The date of each amend	Iment(s) adoption: UO-10-2012
Effective date if applica	ble: (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendmen	nt(s) (CHECK ONE)
	as/were adopted by the shareholders. The number of votes cast for the amendment(s) vas/were sufficient for approval.
	as/were approved by the shareholders through voting groups. The following statement rovided 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)
The amendment(s) was action was not require	as/were adopted by the board of directors without shareholder action and shareholder ed.
The amendment(s) we action was not require	as/were adopted by the incorporators without shareholder action and shareholder ed.
Dated	08-16-2012
Signat	ure AMP
	(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)
	MARC S COHEN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)