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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: STROSS LAW FI	RM, A PROFESSIONAL A	ASSOCIATION	٠ وـ	
DOCUMENT NUMI					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:		茎	
	Howard C. Stross			2917 OCT - 2 AM II: BI	
		Name of Contact Person	1	_	
	Stross Law Firm, a professional association				
		Firm/ Company		_	
	1801 Pepper Tree Drive				
		Address		_	
	Oldsmar, FL 34677				
		City/ State and Zip Cod	e	_	
herre	ss@strosslaw.com: and mhow	wed Outron Name nom			
iistro:	•	sed for future annual report	natification		
	E-man address. (to be us	sed for future annual report	normeation)		
For further information	n concerning this matter, pleas	se call:			
Howard C. Stross		at (515-1187		
Name of Contact Person		Area Code & Daytime Telephone Number		er	
Enclosed is a check fo	r 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Stross Law Firm, a Professional Association

L38859

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

(Document Number of Corporation (if known)

nt(s) to

A. If amending name, enter the new name of the corporation: Stross Law Firm, P. A.	The 1
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." o word "chartered," "professional association," or the abbreviatio	ution," "company," or "incorporated" or the abbreviat or "Co". A professional corporation name must contain
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	Not applicable. No change of address.
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Not applicable. No change of address.
O. If amending the registered agent and/or registered office a new registered agent and/or the new registered office address of New Registered Agent Not Application	ress:
(Florida	a street address)
New Registered Office Address:	. Florida (City) (Zip Code)

Signature of 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Asst.S	Sabrina Casagrande	801 Pepper Tree Drive
XAdd			Oldsmar, FL 34677
Remove		-	
2) Change	Asst.T	Sabrina Casagrande	1801 Pepper Tree Drive
X Add			Oldsmar, FL 34677
Remove			
3) Change		·	
Add			
Remove		-	
4) Change			
Add		_	
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			···
Remove			

E. If amending or add (Attach additional si	ling additional Arti acets, if necessary).	cles, enter chang (Be specific)	e(s) here:			
Not applicable.						
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	* ***					
F. If an amendment p	rovides for an exch	ange, reclassific:	ation, or cancella	ation of issued sl	nares,	
if not applica	olementing the ame ble, indicate N/A)	<u>nament it not co</u> i	ntaineo in t <u>ne a</u> n	<u>nenament usen:</u>		
Not applicable.						
•						
		<u>.</u>				
			<u>.</u>			
			<u> </u>			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	Data Francis 2017	
Effective date if applicable:	October 1, 2017	
	(no more than 90 days after amendment file date	9
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requiremen Department of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
bv		
•	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and share	holder
	ber 28, 2017	
DatedSignature	Mull Vitzan	
sele	a director, president or other officer – if directors or officers have cted, by an incorporator – if in the hands of a receiver, trustee, or cointed fiduciary by that fiduciary)	not been other court
	Howard C. Stross	
	(Typed or printed name of person signing)	
	Sole Shareholder, Sole Director, and President	
	(Title of person signing)	