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SECRETARY OF STATE
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John John

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORI	PORATION:	Sharp & Associates, P.A.			
DOCUMENT NU	MBER:	L90328			
The enclosed Artic	cles of Amendment and fee	are submitted for filing.			
Please return all co	orrespondence concerning th	is matter to the following:			
		rea Darling de Cortes Name of Contact Person			
	Sha	rp & Associates, P.A. Firm/ Company			
	4890 Wes	st Kennedy Blvd., Suite 900 Address			
		Tampa, FL 33609 City/ State and Zip Code			
	acortes E-mail address: (to be use	@sharptaxlaw.com ed for future annual report notification)			
For further informa	ation concerning this matter	, please call:			
	ea Darling de Cortes of Contact Person	at (<u>813</u>) <u>28</u> Area Code & Daytime Tele			
Enclosed is a check	k for the following amount r	nade payable to the Florida Depart	ment of State:		
□ \$35 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 A	ddress	Street Address			

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

(Name of Corporation as current	ssociales, F.A. tly filed with the Florid	da Dept. of State)	
	90328		
**************************************	er of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	Florida Profit Corporation adopts the	e following
A. If amending name, enter the new name of the	he corporation:		
Sharp	Kemm P.A.		new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profes	esignation "Corp," "Inc	c," or "Co". A professional corport	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)			
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new registered. 	istered office address i	FILED SICHE AIT OF STATE TALLAHAS SEE, FLORIDAME of the in Florida, enter the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
		, Florida	-
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			tion.

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) Type of Action <u>Title</u> **Name** Address □ Remove _____ ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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)

The date of each amendment	t(s) adoption: May 14, 2009
'Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	are adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
	14, 2009 a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court
	pointed fiduciary by that fiduciary)
	William M. Sharp, Sr. (Typed or printed name of person signing)
	President
	(Title of person signing)