194196

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Thomas N. Silvern	nan. P.A.		
DOCUMENT NUMBE				
	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
Sa	amuel B. Silverman			
_		Name of Contact Person		
.11	nomas N. Silverman, P.A.			
_		Firm/ Company		
27	700 Donald Ross Road, Uni	it 404		
_		Address		
Pa	ılm Beach Gardens, FL 334	110		
_		City/ State and Zip Code		
¢9	msilverman@gmail.com			
		sed for future annual report	notification)	
For further information c Samuel B. Silverman	oncerning this matter, pleas	se call: at (3865356	
Name of	Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for the	ne following amount made	payable to the Florida Depo	irtment 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)	
	g Address		Address	
	iment Section	Amendment Section Division of Corporations		
	on of Corporations ox 6327		entre of Tallahassee	
	assee, FL 32314		N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Thomas N. Silverman, P.A. (Name of Corporation as currently filed with the Florida Dept. of State) L94196 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 2700 Donald Ross Road, Unit 404 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Palm Beach Gardens, Florida 33410 C. Enter new mailing address, if applicable: 2700 Donald Ross Road, Unit 404 (Mailing address MAY BE A POST OFFICE BOX) Palm Beach Gardens, Florida 33410 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Randell C. Doane Name of New Registered Agent 2979 PGA Boulevard, Suite 201 (Florida street address) Palm Beach Gardens New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Houn

Signature of New Registered 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)

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	<u>V</u>	Mike Jones	
X Add		Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PSTV	Thomas N. Silverman	3801 PGA Blvd, Suite 902
Add			Palm Beach Gardens, FL 33410
X Remove			<u>.</u>
2) Change	VTS	Faren J. Silverman	354 Chilean Ave, Unit 6B
X Add			Palm Beach, FL 33480
Remove 3) Change	þ	Samuel B. Silverman	268 Calle dos Hermanos, Unit 5
X Add			San Juan, Puerto Rico 00907
Remove			
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

tach <i>additional sh</i>	heets, if necessary).	(Be specific)				
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in amendment p	rovides for an exc	hange, reclassifica	tion, or cancellat	ion of issued share	es,	
ovisions for imp	olementing the am	endment if not cor	itained in the amo	endment itself:		
(ц погарриса	hle, indicate NA)					
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	tion:	, if other than the	
date this document was signed.			
Effective date if applicable:			
	(no more than 90 days after amendment file d	late)	
Note: If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing requirentment of State's records.	nents, this date will not be listed as the	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without sha	reholder action and shareholder	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the cient for approval.	amendment(s)	
	red by the shareholders through voting groups. The followh voting group entitled to vote separately on the amend		
"The number of votes cast for	the amendment(s) was/were sufficient for approval		
by:			
	(voting group)		
7/18/2020 Dated	\$ \$ \tag{\tau}		
selected, h	tor, president or other officer – if directors or officers have an incorporator – if in the hands of a receiver, trustee, fiduciary by that fiduciary)		
Sa	muel B. Silverman		
_	(Typed or printed name of person signing)	<u>"</u>	
Pro	esident		
_	(Title of person signing)		

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