

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone #	<del>(</del> )
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	)
(Do	ocument Number)	
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R. WHITE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: South Palm	Beach County Collaborative Law Group, Inc.
N14000000197	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Charles I. Cohen	
	(Name of Contact Person)
FurrCohen	
	(Firm/ Company)
2255 Glades Road suite 301E	
	(Address)
Boca Raton ,Florida 33431	
	(City/ State and Zip Code)
ccohen@furrcohen.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	r, please call:
Charles I. Cohen	561 395-0500 at
(Name of Contac	
Enclosed is a check for the following amount	made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of	S Fee & \$\sumsymbol{\Pi}\$\$\$ \$43.75 \text{ Filing Fee & Certificate of Status } \text{Certified Copy (Additional copy is enclosed)} \text{Certified Copy (Additional Copy is Enclosed)} \text{Enclosed}
Mailing Address	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 to

FILED

Articles of Incorporation of

18 MAY -7 AM 11: 30

South Palm Pace	k (m.	oty Calco	matile The Plante I	
(Name of Corporation a	s current	y filed with the Flo	rida Dept. of State)	
, (Docume	ent Numbe	r of Corporation (if I	known)	
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes	, this <i>Florida Not F</i>	or Profit Corporation adopts the following	
A. If amending name, enter the new name of the	<u>corporatio</u>	on:		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		on" or "incorporate	The new d" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2255 Glades Road Suite301E		
		Boca Raton,Florida	33431	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2255 Glades Road S	Suite301E	
		Boca Raton,Florida	33431	
D. If amending the registered agent and/or regist new registered agent and/or the new registere		ldress:	, enter the name of the	
Name of New Registered Agent:	2255 Glad	es Road Suite301A		
- New Registered Office Address:		(1	Florida street address)	
Boca Rate		n	, Florida	
New Registered Agent's Signature, if changing Relation of the Interest of the Appointment as registered agent.			(Zip Code) of the Obligations of the position.	
	Si	gnature of New Regi	Stered 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         PT         John Doe           X Remove         V         Mike Jones           X Add         SV         Sally Smith	
Type of Action Check One)  Name  Address	
1) x Change D Charles I. Cohen 2255 Glades Road suite	2301E
Add Boca Raton,Florida 33-	431
Remove	
2) x Change D Julia Wyda 2255 Glades Road suite	e 340W
Add Boca Raton,Florida 33	431
Remove	
3 ) Change	
Add	
Remove	
4) Change	
Add	
Remove	
5) Change	
Add	
Remove	
δ) Change	
Add	

. If amending or adding additional A (attach additional sheets, if necessary	y). (Be specific	)				
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The date of each amendment(s) ado	ption:	, if other than the
late this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will no artment of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated		
Signature	the 1 Whi	
(By the chairn have not been	nar or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)  (Typed or printed name of person signing)	
. <del></del>	(Title of person signing)	