P000000008232

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SECRETARY OF SHALL DIVISION OF CONTORATION

C.L. 26-15

COVER LETTER

Division of Corporations NAME OF CORPORATION: LSB & ASSOCIATES, INC DOCUMENT NUMBER: P00000008232 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LOUISE BUEHLER Name of Contact Person Firm/ Company 6408 SWEET MAPLE LANE Address BOCA RATON, FL 33433 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: .OUISE BUEHL Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

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TO: Amendment Section

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

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

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

□\$52.50 Filing Fee

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Articles of Amendment to Articles of Incorporation of



LSB & ASSOCIATES, INC

15 FEB 24 PM 12: 54

(Name of Corporation as currently filed with the Flori	da Dent. of State)
P0000008232	
(Document Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
LSB & ASSOCIATES, P.A.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Age	

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	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add Remove			
2) Change			
Add Remove			
3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove 6) Change			
Add			
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
`	OF THE ORIGINAL ARTICLES OF INCORPORATION, "ANY AND
LL LAWFUL	BUSINESS" SHOULD BE AMENDED TO SAY "REALTOR" IN
OMPLIANCE	E WITH THE RULES OF INCORPORATING A PROFESSIONAL
SSOCIATIO	N. BECAUSE THIS NAME CHANGE IS ESTABLISHING A
PROFESSION	NAL ASSOCIATION, WE ARE SPECIFYING THE NATURE OF
HIS COMPA	NY'S BUSINESS IN THIS AMENDED ARTICLE II.
provisions for	ent provides for an exchange, reclassification, or cancellation of issued shares, r implementing the amendment if not contained in the amendment itself: plicable, indicate N/A)
-	

The date of each amendment(s) adoption:date this document was signed. Effective date if applicable:	SECRETARY OF STATE SECRETARY OF CORPORATIONS 15 FEB 24 PM 12: 54	, if other than the
	o more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECI	K ONE)	
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	eholders. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the sha	areholders through voting groups. The following statement up entitled to vote separately on the amendment(s):	
by		
by(voting g	group)	
The amendment(s) was/were adopted by the boar action was not required.	rd of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the inco action was not required.	rporators without shareholder action and shareholder	
Dated 02/18/2015 Signature	2 Buella	
	at or other officer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court that fiduciary)	
LOUISE BU	EHLER	
	(Typed or printed name of person signing)	_
PRESIDEN'	Т	
	(Title of person signing)	_