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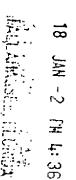
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PATRICK K. A	AMBROSE, C.P.A., P.A.
DOCUMENT NUMBER: P00000031486	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
PATRICK K. AMBROSE	
	Name of Contact Person
	Firm/ Company
8600 113TH ST NO	
SEMINOLE, FL 33772	Address
	City/ State and Zip Code
PAT@PAMBROSECPA.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
PATRICK K. AMBROSE	at (at (
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mac	le payable to the Florida Department of State:
■ \$35 Filing Fee & Certificate of Status	
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 υſ

PATRICK K. AMBROSE, C.P.A., P.A.

(Name	of Corporation as currer	ntly filed with the Florida Dept. of Sta	te)		
P00000031486			_		
	(Document Number	of Corporation (if known)		_	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the	following	ameno	dment(s) to
A. If amending name, enter the new n	ame of the corporation:				
AMBROSE & VARDY CPA'S, P.A.	•			The i	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or	"Co". A professional corporation nai	or the ab	brevia	tion
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		8600 113TH ST NO			
		SEMINOLE, FL 33772			
				_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8600 113TH ST NO		18	
		SEMINOLE, FL 33772	***	—Ų. N.	_
				-2	_ <u> </u>
D. If amending the registered agent an new registered agent and/or the new				<u>.</u> :	
Name of New Registered Agent	PATRICK K. AMBROSE		*	3 6	
	8600 113TH ST NO				
	(Florida s	street address)			
New Registered Office Address:	SEMINOLE	Florida	, Florida ³³⁷⁷²		
		(City)	(Zip Ce	rde)	_

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.

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

	rs, if necessary). (es, enter change(s) (Be specific)	nere.		
					
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f an amendment property for implementations for implementations.	<u>nenting the amendr</u>	ge, reclassification ment if not contain	n, or cancellation of the in the amenda	of issued shares, nent itself:	
(if not applicable,	indicate N/A)				
	 -				
				-	
<u> </u>			•		
		 -	_ 		-
			_ 		_

•	12/22/2017	
The date of each amendment(s) adoption date this document was signed.	otion:	_ if other than the
01/02/2 Effective date <u>if applicable</u> :		
пирисане.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depart	ek does not meet the applicable statutory filing requirements, this date will natment of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.	
☐ The amendment(s) was/were approx must be separately provided for each	red by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	
12/22/2017		
Dated		
Signature	MAS	
(By a direc selected, by	tor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
PA	TRICK K. AMBROSE	
	(Typed or printed name of person signing)	
PR	ESIDENT	
_	(Title of person signing)	

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