# P0000077336

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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	l
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Special Instructions to Filing Officer:	
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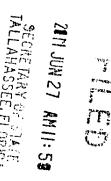


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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

<b>k</b> • • • • • • • • • • • • • • • • • • •				
NAME OF CORPORATION: ALLISON Mitchell ASSOCIATES, INC.				
DOCUMENT NUMBER: POODO	077336			
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
Brian Zobens	of Contact Person			
ALLI'SON MA	irm/Company			
3610 SAN SIMEU CINCLE Address				
$\frac{\sqrt{165700}}{\text{City/ State and Zip Code}}$				
E-mail address: (to be used for	future annual report notification)			
For further information concerning this matter, plea	ase call:			
Name of Contact Person	at (30°) 301-2443 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Department of State:			
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & . □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

### **Articles of Amendment**

to

# Articles of Incorporation

000000 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." 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) Florida (Zip Code) 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)

<u>Title</u>	Name .	<u>Address</u>	Type of Action
EUP	DiANA. A. Zobeag	3610 Sa) S. MES.C. INF 57 UN, F/ 33331	Add Remove
			Add Remove
<del></del>			Add Remove
	ling or adding additional Articles, ente Iditional sheets, if necessary). (Be spec		
	·	•	
<u>provisio</u>	nendment provides for an exchange, remains for implementing the amendment if of applicable, indicate N/A)		

The date of each amendment(s) adoption: 6/2/20/)  [date of adoption is required)  Effective date if applicable: (no more than 90 days after amendment file date)				
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.			
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):			
"The number of votes case	t for the amendment(s) was/were sufficient for approval			
by	oting group)			
(v	oting group)			
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder			
Dated 6	Palaci			
selecte	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court			
арроп	ted fiduciary by that fiduciary)			
-	(Typed or printed name of person signing)			
-	PRES			
	(Title of person signing)			