P00000082150

(Re	questor's Name)	
(Ad	dress)	·····
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: VALENTI 8		P.A.			
DOCUMENT NUME	BER: P0000008215	0				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this man	tter to the following:				
	LORRAINE VALE	ENTI				
		Name of Contact Person	<u> </u>			
	VALENTI & ASSOCIATES, P.A.					
		Firm/ Company				
1211 N. WESTSHORE BLVD. SUITE 414						
		Address				
	TAMPA, FLORID	A 33607				
		City/ State and Zip Code	2			
lavo	office@aol.com					
	_	ed for future annual report	notification)			
For further information	n concerning this matter, pleas	e call:				
Lorraine Vale	enti	_{at (} 813	, 288-1515			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	rtment 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)			
Mailing Address		Street Address				
Amendment Section		Amendment Section				
	sion of Corporations	Division of Corporations				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle						
Tallahassee, FL 32314 Zoof Excedite Circle						

Articles of Amendment to Articles of Incorporation of



VALENTI & ASSOCIATES, P.A.

15 FEB 12 AMII: 24

(Name of Corporation as currently filed with the Flo	urida Dent of State)
P0000082150	, , , , , , , , , , , , , , , , , , ,
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Lorraine A. Valenti, P.A.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office addressiness registered agent and/or the new registered office address:	
Name of New Registered Agent	.
(Florida stree	t address)
New Registered Office Address:	. Florida
(City)	Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wing signature of New Registered Agent.	

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				
Add		_		
Remove				
Kemove				

provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

		_

The date of each amendment(s) a date this document was signed. Effective date if applicable:		SECRETARY SECRETARY BIVISION OF CO 15 FEB 12 as after amendment file		, if other than the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The num ufficient for approval.	ber of votes cast for the	amendment(s)	
	proved by the shareholders through reach voting group entitled to vote s			
"The number of votes cas	for the amendment(s) was/were suf	ficient for approval		
by	(voting group)			
The amendment(s) was/were ad action was not required.	opted by the board of directors with	out shareholder action a	and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without s	hareholder action and s	hareholder	
_{Dated} Februa	ry 9, 2015	_		
selecte	inector, president or other officer — ed, by an incorporator — if in the han nted fiduciary by that fiduciary)			_
	Lorraine A. Valenti			
	(Typed or printe	d name of person signin	g)	_
	President			
	(Title of	person signing)		