

P000000098100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

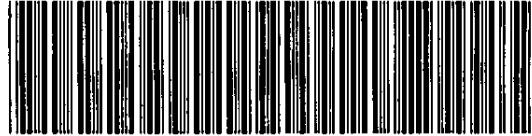
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04/20/16--01020--003 **43.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAY -4 AM 9:30

FILED

And

MAY 05 2016

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 21, 2016

DEBORAH BAKER
250 S. CENTRAL BLVD STE 104A
JUPITER, FL 33458

SUBJECT: CATHLEEN SCOTT & ASSOCIATES, P.A.
Ref. Number: P00000098100

We have received your document for CATHLEEN SCOTT & ASSOCIATES, P.A. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 716A00008292

RECEIVED
16 MAY -4 PM 3:52
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



**SCOTT
WAGNER**
AND ASSOCIATES, P.A.

EMPLOYMENT • CIVIL RIGHTS • HEALTHCARE
www.scottwagnerlaw.com

Sender E-Mail: CScott@ScottWagnerLaw.com

May 3rd, 2016

VIA FEDEX:

Ms. Rebekah White
Regulatory Specialist, II
Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Ms. White,

Per your letter dated, April 21, 2016, enclosed please find the revised Articles for filing in accordance with your instructions. Please contact me with any questions for additional information.

Best regards,

Cathleen Scott, Esq.
cn=Cathleen Scott, Esq., o, ou,
email=cscott@csapalaw.com,
c=US
2016.05.02 16:55:12 -04:00

CATHLEEN SCOTT

CS: jp

Enclosure:

- 1) The original articles of amendment
- 2) Copy of original articles of amendment
- 3) Self-addressed envelope
- 4) Check in the amount of \$43.75
- 5) FL Department of State letter dates 04/21/2016

T: (561)653-0008
F: (561)653-0020
TF: (877)907-2688

250 S. Central Blvd. Ste. 104A
Jupiter, Florida 33458
Additional office in West Palm Beach

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cathleen Scott & Associates, P.A

DOCUMENT NUMBER: P00000098100

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Baker

Name of Contact Person

Cathleen Scott & Associates, P.A

Firm/ Company

250 S. Central Blvd. Suite 104A

Address

Jupiter, FL 33458

City/ State and Zip Code

DBaker@ScottWagnerLaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Baker at (561) 653-0008

Name of Contact Person

Area Code & Daytime Telephone Number

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

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|--|--|

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
of

FILED

16 MAY -4 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cathleen Scott & Associates, P.A.

(Name of Corporation as currently filed with the Florida Dept. of State)

P00000098100

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A *The new 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**)

N/A

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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 N/A

(Florida street address)

New Registered Office Address: N/A, 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 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:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

E. FLORIDA PROFIT BENEFIT CORPORATION OPTIONS, IF APPLICABLE:

- ☒ The corporation, in accordance with the required minimum status vote, elects to be a Florida Profit Benefit Corporation in accordance with s. 607.604, F.S.

The purpose for which the benefit corporation is organized is to create a general public benefit and to engage in the practice of law and other related business and transactions.

The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) is/are as follows (optional):

N/A

The additional qualifications of Benefit Director(s), if any, are as follows:

N/A

The name(s) and address(es) of the Benefit Director(s) and/or Benefit Officer(s), if any:

Name and Title: Cathleen Scott, Partner &
President

Address: 250 S. Central Blvd., Suite 104A

Jupiter, FL 33458

Name and Title: Lindsey Wagner, Partner

Address: 250 S. Central Blvd., Suite 104A

Jupiter, FL 33458

(Include attachment if necessary)

- ☐ The corporation, in accordance with the required minimum status vote, terminates its status as a Florida Profit Benefit Corporation in accordance with s. 607.605, F.S. The revised purpose for which the corporation is organized is as follows:

The additional qualifications of Benefit Director(s), if any, are no longer applicable and are hereby deleted.

The date of each amendment(s) adoption: April 18, 2016, if other than the date this document was signed.

Effective date if applicable: April 22, 2016
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 4/19/2016

Signature [Signature]

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Cathleen Scott

(Typed or printed name of person signing)

President

(Title of person signing)