Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H210003924173)))



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To:

Division of Corporations

Fax Number

Fax Number : (850)617-6380

: (888)503-5258

From:

Account Name : OLIVE JUDD, P.A. Account Number : I20200000171

Phone : (954)334-2250

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. * #11()

Email Address: julic@floridaluxurious.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN JULIE JONES-BERNARD, P.A.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

HMpSULKER

OCT 22 2021

TO: Amendment Section

Tallahassee, FL 32303

(((H21000392417 3)))

COVER LETTER

Division of Corp	orations		
NAME OF CORPOR	RATION: JULIE JONES-BE	ERNARD, P.A.	
	BER: P01000003290		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Nicole M. Villarroel, Esq.		
		Name of Contact Person	0
	Olive Judd, P.A.		
		Firm/ Company	
	2426 E. Las Olas Blvd		
		Address	
	Fort Lauderdale, FL 33301		
		City/ State and Zip Cod	e
	nvillarroel@olivejudd.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Nicole M. Villarroel,	Esq.	at (954	334-2250
Name o	of Contact Person	Area Co) 334-2250 de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mail</u>	ling Address		Address
	ndment Section		ment Section
	sion of Corporations		n of Corporations
	Bux 6327		entre of Tallahassee
Tallahassee, FL 32314		2413 r	V. Monroe Street, Suite 810

(((H21000392417 3)))

11 11 112	CONTROL	DEDVIVDIA	D A

Fax:

(INAME C	f Corporation as currentl	y filed with the Florida Dept. of State))	
P01000003290				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the fo	ollowing amendm	ent(s) to
A. If amending name, enter the new na JULIE JONES, P.A.	ame of the corporation:		The nev	v
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,	Corp," "Inc," or "Co". 🗷	1 professional corporation name must	reviation "Corp.,	,,
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			7021	المراجع الماد
D. If amending the registered agent an	d/or registered office add	ress in Florida, enter the name of the	A LASSEE	
new registered agent and/or the nev			.F.	
Name of New Registered Agent	Olive Judd, P.A.		TE IS	
	2426 E. Las Olas Blvd			
	(Florida str	eet address)		
N'= " Parietavad Office Address"	C III.I.	3	3301	
New Registered Office Address:	Fort Lauderdale	. Florida		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (e), F.S.

10/21/2021 11:52 AM

Example:

(((H210003924173)))

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)

Fax:

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.

X_Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	Julie Jones-Bernard	2008 ADMIRALS WAY
Add			FT. LAUDERDALE, FL 33316
Remove 2) Change	D	Julie Jones	2008 ADMIRALS WAY
X Add			FT. LAUDERDALE, FL 33316
Remove Change			
Add			
Remove 4) Change			
Add			
5) Change			
Add			
Remove 6) Change			
Add			
Remove			

Fax:

(((H21000392417 3)))

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
11 11 11	
f an amendment provides for an exci	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

444,344, <u>.</u>	

Fax:

(((H21000392417 3)))

The date of each am date this document w	endment(s) adoption:, if other than the as signed.
Effective date <u>if app</u>	licable: (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
	certed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
Adoption of Amend	ment(s) (CHECK ONE)
The amendment(s action was not req) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder uired.
) was/were adopted by the shareholders. The number of votes cast for the amendment(s) rs was/were sufficient for approval.
) was/were approved by the sharcholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s):
"The numbe	r of votes east for the amendment(s) was/were sufficient for approval
by	, n
	(voting group)
Da	ted October 18, 2021
Sig	nature
	(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)
	Julie Jones
	(Typed or printed name of person signing)
	Director
	(Title of person signing)