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C. LEWIS EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Colonial Consulting Corporation				
DOCUMENT NUME	BER: P01000007515	5		
	of Amendment and fee are su			
Please return all corres	spondence concerning this mat	ter to the following:		
	Sebastian Nye-Sc	hmitz, Esq.		
		Name of Contact Person	l	
	Colonial Consultin	g Corporation		
		Firm/ Company		
2841 Mizzen Way				
		Address		
	Naples, FL 34109			
		City/ State and Zip Code		
sns	@swfltaxlaw.com			
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Sebastian Nye-Schmitz, Esq. at (239) 989-9985 Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number			de & 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 & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	Mailing Address Street Address			
	endment Section		ment Section	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301



APPROVED AND FILED

Articles of Amendment to Articles of Incorporation of

13 NOV 12 PM 3: 03

SECRETARY OF STATE TALLAHASSEF, FLORIDA

Colonial Consulting Corporation

(Name of Corporation as currently filed with the l	Florida Dept. of State)
P01000007515	
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: The Nye-Schmitz Law Firm, P.A.	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2841 Mizzen Way
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Naples, FL 34109
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2841 Mizzen Way
	Naples, FL 34109
D. If amending the registered agent and/or registered office add	lucco in Florido entanthe name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	reet address)
	•
New Registered Office Address: (City)	, Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
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 Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	SV Sa	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P,T	Werner Schmitz	1342 Colonial Blvd Ste D25
Add			Fort Myers, FL 33907
Remove			
2) Change	VP, S	Hannelore Schmitz	1342 Colonial Blvd Ste D25
Add			Fort Myers, FL 33907
Remove			
3) Change	PTSD	Sebastian Nye-Schmitz, Eş	2841 Mizzen Way
Add			Naples, FL 34109
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding a (Attach additional sheets,	dditional Articles, enter change(s) here: if necessary). (Be specific)
	usiness shall be restated as follows:
The purpose of this co	ompany is to engage in the practice of law.
	, , , , , , , , , , , , , , , , , , ,
	
F. If an amendment provid	es for an exchange, reclassification, or cancellation of issued shares,
provisions for implement (if not applicable, in	nting the amendment if not contained in the amendment itself:
(y not applicable, in	mode (vii)
	

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The date of each amendment	t(s) adoption:	13 NOV	12 PH	1 3: 03, if other than
date this document was signed		SECRETA	ARY OF	
Effective date if applicable:	November 12, 2013	TALLAHA	SSEE,	FLORIDA
	(no more than 90 days	after amendment file date)		
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The numbere sufficient for approval.	er of votes cast for the ame	ndment(s	s)
	re approved by the shareholders through veed for each voting group entitled to vote se			ent
	s cast for the amendment(s) was/were suffi	cient for approval		
by	(voting group)	•		
,	(voting group)			
action was not required.	re adopted by the board of directors without sh			er
Dated_Nov	rember 11, 2013			
So	By a director, president or other officer – if elected, by an incorporator – if in the hand ppointed fiduciary by that fiduciary)			
	Sebastian Nye-Schmitz, Es	q.		
	(Typed or printed	name of person signing)		
	President and Sole Director	•		
	(Title of p	erson signing)		