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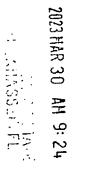
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Fitzsimmons, Hev	vitt & Cain, P.A.			
	BER: P01000016261			•	
	of Amendment and fee are su	ubmitted for tiling.		•	
Please return all corre	spondence concerning this ma	atter to the following:			
	Scott K. Hewitt				
		Name of Contact Perso	n		
		Firm/ Company		202	
	2111 W Swann Ave., Suite 2	•		BHAF	67
	Tampa, FL 33606	Address		2023 MAR 30 AM 9: 24	
		City/ State and Zip Cod	e	SEE.	
	SKH@ManFitzLaw.com			7 2	
	E-mail address: (to be us	sed for future annual report	notification)	•	
For further informatio	n concerning this matter, pleas	se call:			
Scott K. Hewitt		at (221-0200		
Name o	of Contact Person	Area Co	de & Daytime Telephone Nur	nber	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 nhassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303)	

Articles of Amendment to Articles of Incorporation of

Fitzsimmons, Hewitt & Cain, P.A.

(Name of Corporation as current	ly filed with the Florida Dept. of State)	
P01000016261		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation: Fitzsimmons, Hewitt, Stranzl & Spaid, P.A.		77
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		2023
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		MAR 30 All 9: 24
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida sn	reet address)	
New Registered Office Address:	, Florida_	er colo
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>I:</u>	(Zip Code) sition.
Signature of New k	Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11)		

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 Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	John N. Cain	2111 W Swann Ave, Suite 200
Add			Tampa, FL 33606
X Remove	ŕ		
2) Change	D	Benjamin S. Stranzl	2111 W Swann Ave, Suite 200
X Add			Tampa, FL 33606 . 22
Remove 3) Change	D	Stephen A. Spaid	2111 W Swann Ave. Sune 200
X Add			Tampa, FL 33606
Remove			SEE THE COLUMN TO THE COLUMN T
4) Change			9: 21 F-7: 21
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 .		
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)		
(Times manifestation of the control		
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	2	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
N/A		

	3/23/2023	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
	23/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man in days after timenament five delie)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and	l shareholder
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	20
must be separately provided for "The number of votes can	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): st for the amendment(s) was/were sufficient for approval	F11. E
by	(voting group) " " " " " " " " " " " " " " " " " " "	AH 9: 24
	77	
3/23/2023	3	· F
Dated	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	_
	Scott K. Hewitt	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	