## PO10000 63762

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(City	y/State/Zip/Phone	e #)
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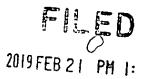
C. GOLDEN FEB 2 6 2019

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: PERLET, SHINE	R, MCKAMEY, MELCHIC	ORRE & WALSH, P.A.
	BER: P01000063762		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	HEIDI PERLET		
		Name of Contact Perso	n
	PERLET & SHINER, P.A.		
		Firm/ Company	
	515 NORTH FLAGLER DR	IVE, SUITE 701	
		Address	<u> </u>
	WEST PALM BEACH, FLO	ORIDA 33401	
		City/ State and Zip Cod	e
НРЕ	RLET@PALMBEACHDEFE	NSE.COM	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:at (561	721-0552
Name (	of Contact Person		de & Daytime Telephone Number
	r the following amount made		,
■ \$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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation of



PERLET, SHINER, MCKAMEY, MELCHIORRE & WALSH, P.A.

P01000063762	<u>corporation as current</u>	itly filed with the Florid	la Dept. of State)	
10100000702			14LEAH <b>A</b> SSEE, F	
	(Document Number	of Corporation (if known	1)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, thi	s Florida Profit Corpord	ntion adopts the following amendment(s) to	
A. If amending name, enter the new name	e of the corporation:			
PERLET & SHINER, P.A.			The new	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	on "Corp," "Inc," or	"Co". A professional of	incorporated" or the abbreviation	
B. Enter new principal office address, if applicable:		N/A/		
(Principal office address <u>MUST BE A STR</u>		N/A	<del></del>	
		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
		N/A		
		N/A		
D. If amending the registered agent and/o new registered agent and/or the new r			he name of the	
Name of New Registered Agent	/A			
	/A			
_	(Florida s	treet address)		
	/A		, Florida	
New Registered Office Address:				

## 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	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
2) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
3) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
4) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
5) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
6) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A

i. <u>If amending</u> (Attach <i>addi</i> .	g or adding additional Ar tional sheets, if necessary)	ticles, enter chan	ge(s) here:			
N/A	north shoets, y necessary)	ine specific)				
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' Ifan amand						
provisions	lment provides for an exe for implementing the am	endment if not co	ntained in the ar	ation of issued si nendment itself:	nares,	
(if not a	applicable, indicate N/A)					
√A 						
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•	N/A	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
N/A Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	t
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
02/18/2019		
Dated		
Signature		<del></del>
	rector, president or other officer – if directors or officers have not been	
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Vice-President	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·