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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: OFSTEIN & ASSO	OCIATES, P.A.	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	NICOLE S. OFSTEIN		
		Name of Contact Person	1
	OFSTEIN & ASSOCIATES	, P.A. / OFSTEIN LAW, P.	Α.
•		Firm/ Company	
	10101 W Sample Rd, Suite 4	117	
•		Address	
	Coral Springs, FL 33065		
•		City/ State and Zip Cod	e
	nicole@ofsteinlaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
NICOLE S. OFSTEIN		at (756-9477
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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(Name	of Corporation as curren	tly filed with the Florida Dept. of State)			
P01000067970					
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new n	ame of the corporation:				
OFSTEIN LAW, P.A.		The new			
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word			
B. Enter new principal office address,	if applicable:	10101 W Sample Rd, Suite 417			
(Principal office address MUST BE A S		Coral Springs, FL 33065			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10101 W Sample Rd, Suite 417			
<u> </u>		Coral Springs, FL 33065			
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent					
Name of New Registered Agent	9536 NW 67 PL				
		treet address)			
New Registered Office Address:	Parkland	. Florida 33076			
New Registered Office Address.		(City) (Zip Code)			
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: with and accept the obligations of the position.			
	C: 6V	Desire to the second of the second			
	Signature of New	Registered Agent, if changing			

Check if applicable

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

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)

Example:

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	<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) X Change	PTSD	Nicole S Ofstein	9536 NW 67 PL
Add			Parkland, FL 33076
Remove			
2) Change	*		
Add			
Remove 3) Remove			
Add			
Remove			
4) Change			
Add			· · · ·
Remove			
5) Change			·
Add			
Remove			
<i>δ</i>) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
N/A		
		
-		
	·· - ·-	<u> </u>
·		
provisions for implementing the ame	hange, reclassification, or cancellation of issendment if not contained in the amendment	ued snares, itself:
(if not applicable, indicate N/A)		
//A		

·	02/16/2023	
The date of each amendment(s) ad date this document was signed.	loption:	, if other than the
	6/2023	
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, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amer fficient for approval.	idment(s)
must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendments	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
selected	rector, president or other officer – if directors or officers have not, by an incorporator – if in the hands of a receiver, trustee, or other diduction by that fiduction. Nicole S Officin	
	· · · · · · · · · · · · · · · · · · ·	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	