## P01000117219

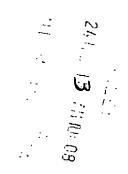
(Request	or's Name)
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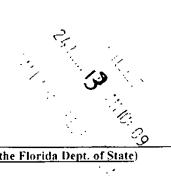


## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: SUZANNE AMAE	DUCCI-ADAMS, P.A.	
DOCUMENT NUME	BER: P01000117219		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Suzanne Amaducci		
		Name of Contact Persor	1
	Bilzin Sumberg		
	<del></del>	Firm/ Company	
	1450 Brickell Ave., 23rd Floo	or	
		Address	
	Miami, FL 33131		
		City/ State and Zip Code	•
	samaducci@bilzin.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call: at (at	350-2370
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
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	S43.75 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 Indiment Section Is on of Corporations Box 6327 Inhassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of



SUZANNE AMADUCCI-ADAMS, P.A.

(Name o	f Corporation as curren	tly filed with the Florida Dept. of State)		
P01000117219		· ••		
· · · · · · · · · · · · · · · · · · ·	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	ame of the corporation:			
SUZANNE M. AMADUCCI, P.A.		The new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "Chartered," "professional association,"	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: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		1450 Brickell Ave.		
		23rd Floor		
		Miami, FL 33131		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1450 Brickell Ave.		
. ,		23rd Floor		
		Miami, FL 33131		
D. If amending the registered agent an new registered agent and/or the new				
Name of New Registered Agent	Suzanne M. Amaducci			
	1450 Brickell Ave., 23rd	Floor		
	(Florida :	treet address)		
New Registered Office Address:	Miami	, Florida		
		(City) (Zip Code)		
New Registered Agent's Signature, if of I hereby accept the appointment as registered.	ered agent. I lm familia.	nt:  r with and accept the obligations of the position.  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>	<u>John Doe</u>	
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) Change	DPST	Suzanne M. Amaducci	1450 Brickell Ave.
X Add		_	23rd Floor
Remove			Miami, FL 33131
2) Change	DPST	Suzanne Amaducci-Adams	1450 Brickell Ave.
Add			23rd Floor
X Remove 3) Change			Miami, FL 33131
Add			
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheet	g additional Articles, ent ts, if necessary). (Be spe	ecific)			
N/A					
					<del></del>
		<del></del>			
<del></del>	-				
				<del>_</del>	
			-		
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		<del>_</del>			
			<del></del>		<del>-</del>
<del></del>	<del></del>	<del></del>			
				<del></del>	
If an amendment pro	vides for an exchange, romenting the amendment	eclassification, or can	cellation of issued sha	res,	
(if not applicable.	menting the amendment , indicate N/A)	ii not containeu in tu	e amendment usen.		
N/A					
N//	· <del>-</del>	·			
			<del>-</del> -	<u></u>	
· -					
			· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) ac	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the Do	lock does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder acti	ion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment officient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
Dated 3-1	2 - 24/	
Signature(By a d	irector, president of other officer - if directors or officers have not been	
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)	rt
	Yours M. Amelucii	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	