PO1000120938

(Re	equestor's Name)	
(Ad	dress)	
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: S. Mark Hand & Associates, P.A. DOCUMENT NUMBER: P01000120938 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Constance Bennett Name of Contact Person S. Mark Hand & Associates, P.A. Firm/ Company 1301 Riverplace Blvd., Suite 2400 Address Jacksonville, Florida 32207 City/ State and Zip Code cbennett@smhcpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ($\frac{904}{\text{Area Code & Daytime Telephone Number}}$ Constance Bennett Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **■\$43.75** Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

S. Mark Hand & Associates, P.A.	
(Name of Corporation as currently filed with the FI	orida Dept. of State)
P01000120938	
(Document Number of Corporation (if	Known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> 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 new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Gword "chartered," "professional association," or the abbreviation "Inc.," or the abbreviation "In	Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	net address)
New Registered Office Address:	, Florida
New Registered Office Address: (City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Registered A	gent, 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 <math>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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u></u>	Brian A. Hall	1301 Riverplace Blvd.
Add			Suite 2400
Remove			Jacksonville, FL 32207
2) Change			
Add			
Remove			
3) Change	·		
Add			
Remove			
4) Change		•	
Add			
Remove			
5) Change	=		
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	. (Be specific)				
				 	
					
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an amendment provides for an ex- rovisions for implementing the an	change, reclassi	ication, or car	ncellation of	issued snaj	res,
(if not applicable, indicate N/A)	ienament ii not	Contained in t	ne amename	iit itseii.	
(y nor appreciate, material (vir)					
				_	
12.10					
					
					
					

The date of each amendment date this document was signed.	(s) adoption: January 1, 2015	, if other than the
Effective date if applicable:	January 1, 2015	
Effective date in appricable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	2/4/15	
Signature	J. Musto	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	S. Mark Hand	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	_