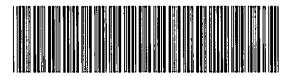
## PD2000101784

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: CHIMPOULIS, HUNTER & LYNN, P.A. DOCUMENT NUMBER: P02000101784 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ELIZABETH CHIMPOULIS, CLA Name of Contact Person CHIMPOULIS & HUNTER, P.A. Firm/ Company 150 S Pine Island Rd., Suite 510 Address PLANTATION, FL 33324 City/ State and Zip Code EWC@CHL-LAW.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 954 ) 463-0033

Area Code & Daytime Telephone Number **ELIZABETH CHIMPOULIS** 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 enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CHIMPOULIS, HUNTER & LYNN, P.A.

	filed with the Florida Dept. of State)
P02000101784	
(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:	
CHIMPOULIS & HUNTER, P.A.	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	20
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	¥ ()
	<u></u>
	2
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	
new registered agent and/or the new registered office address:	
new registered agent and/or the new registered office address:	
new registered agent and/or the new registered office address:	
<u>Name of New Registered Agent</u> N/A	

## 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 Doc	<u>:</u>						
X Remove	$\underline{\mathbf{V}}$	Mike Jon	<u>ies</u>						
<u>X</u> Add	<u>sv</u>	Sally Sm	<u>ith</u>						
Type of Action (Check One)	<u>Title</u>		Name				<u>Addres</u> s		
1) Change			N/A		<u> </u>				 
Add							<del></del>	<del> </del>	 
Remove									
2) Change		_			. <u>.</u>	<u>-</u> .			
Add									
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3 ) Change		_		···		<del></del>			 
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4) Change									
Add									
Remove									 
5) Change		_		<u>.</u>					
Add									
Remove									
6) Change		<u></u>							 
Add									 
Remove									

Attach addit	or adding addition ional sheets, if neces.	sary). (Be specific	)			
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provisions (if not c	ment provides for a for implementing th applicable, indicate i	e amendment if not	ification, or cance contained in the	llation of issued s amendment itself:	<u>hares,</u>	
N/A	<del></del>					
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	OCTOBER 1, 2018	
The date of each amendment(s) date this document was signed.		, if other than the
	OVEMBER 10, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date videous pepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
NOVEN Dated	1BER 12, 2018	
Signature	faith and	
(By a	director, president of other officer -) if directors or officers have not been	
	sted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciary)	
	JAY P. CHIMPOULIS	
	(Typed or printed name of person signing)	
	DIRECTOR/PRESIDENT/SECRETARY	
	(Title of person signing)	