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T. ROBERTS

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Sarah P. Vickers P.A. DOCUMENT NUMBER: P02000106325 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Roberta Costante Name of Contact Person Sarah P. Vickers P.A. Firm/ Company 16656 SW Warfield Blvd. Address Indiantown, Florida 34956 City/ State and Zip Code spv1313@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (772) 209-0718

Area Code & Daytime Telephone Number Roberta Costante 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 Certified Copy (Additional copy is 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

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

P02000106325 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 16656 SW Warfield Blvd. (Mailing address MAY BE A POST OFFICE BOX) Indiantown, Florida. 34956 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address; Roberta Costante Name of New Registered Agent 16656 SW Warfield Blvd. (Florida street address) Indiantown New Registered Office Address: Florida (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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 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> 1	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Sarah P. Vickers	7648 SE Swan Ave.
Add			Hobe Sound, Florida
X Remove			33455
2) Change	D	Roberta Costante	16656 SW Warfield Blvd
X Add			Indiantown, Florida
Remove			34956
3) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change	*··		
Add			
Remove			
5) Change	*****		
Add			
Remove			
6) Change	***	**************************************	***
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	icies, enter change (Be specific)	e(s) here:		
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lf an amendment provides for an exch	ange, reclassificat	ion, or cancellatio	n of issued shar	PS.
provisions for implementing the ame	ndment if not con	tained in the amen	lment itself:	<u> </u>
(if not applicable, indicate N/A)				
/A				
				
				<u> </u>

The date of each amendment(s) adoption: December 17, 2012
Effective date if applicable: December 17, 2012
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_December 17, 2012
Signature Janah P. Vil
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Sarah P. Vickers
(Typed or printed name of person signing)
Director
(Title of person signing)