

PD2000108959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

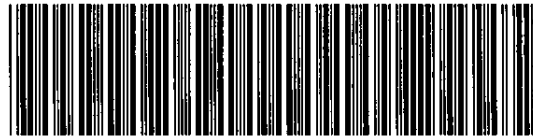
(Business Entity Name)

(Document Number)

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FILED
12 MAY 18 AM 10:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAY 21 2012

T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 2, 2012

JASON MARC ALTMAN, CPA
JASON MARC ALTMAN, CPA PA
1880 N CONGRESS AVE STE 307
BOYNTON BEACH, FL 33426

SUBJECT: LISNOFF AND ASSOCIATES, INC.
Ref. Number: P02000108959

We have received your document for LISNOFF AND ASSOCIATES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

The date of adoption of each amendment must be included in the document.

We do not need your original articles.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 112A00013180

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2012 MAY 18 AM 8:42
NOT RETURNED
TO AGENCY OF FILING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Lisnoff and Associates, Inc.

DOCUMENT NUMBER: P02000108959

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Marc Altman, CPA

Name of Contact Person

Jason Marc Altman, CPA PA

Firm/ Company

1880 N Congress Avenue Suite 307

Address

Boynton Beach, FL 33426

City/ State and Zip Code

jaltman@jasonaltmancpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Altman

Name of Contact Person

at (561) 733-5300

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

12 MAY 18 AM 10:40

Lisnoff and Associates, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000108959

DEPT. OF STATE
TALLAHASSEE FLORIDA

(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:

Harold Lisnoff, PA

The new

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."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Harold Lisnoff

11196 Green Lake Drive #103

(Florida street address)

New Registered Office Address: Boynton Beach, Florida 33437

(City)

(Zip Code)

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change <u> </u> Add <u>X</u> Remove	<u>PTD</u>	<u>Eileen Lisnoff</u>	<u>11196 Green Lake Drive #103</u> <u>Boynton Beach, FL 33437</u>
2) <u> </u> Change <u>X</u> Add <u> </u> Remove	<u>PTD</u>	<u>Harold Lisnoff</u>	<u>11196 Green Lake Drive #103</u> <u>Boynton Beach, FL 33437</u>
3) <u> </u> Change <u>X</u> Add <u> </u> Remove	<u>V</u>	<u>Eileen Lisnoff</u>	<u>11196 Green Lake Drive #103</u> <u>Boynton Beach, FL 33437</u>
4) <u> </u> Change <u> </u> Add <u> </u> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
5) <u> </u> Change <u> </u> Add <u> </u> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
6) <u> </u> Change <u> </u> Add <u> </u> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The purpose of this corporation shall
be to act as an agent in real estate
sale and rental transactions.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____

5-15-12

Effective date if applicable: _____

(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)

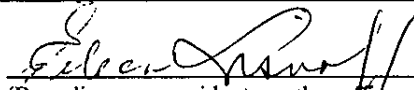
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

5/15/12

Signature



(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)

EILEEN LISNOFF

(Typed or printed name of person signing)

VP

(Title of person signing)