P02000112789

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Sweet Sparkman A	Architects, Inc.				
DOCUMENT NUMI	BER: P02000112789					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	Todd Sweet					
	Name of Contact Person					
	Sweet Sparkman Architects, Inc.					
		Firm/ Company				
	1819 Main Street, Suite 400					
		Address				
	Sarasota, Florida 34236					
		City/ State and Zip Code	 			
	jkozaka@sweetsparkman.com	m				
	· •	sed for future annual report	notification)			
For further information	n concerning this matter, plea		952-0084			
	of Contact Person	at (<u>941</u>) 952-0084 de & Daytime Telephone Number			
	r the following amount made					
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Sweet Sparkman Architects, Inc.

202000112790		<u>ly filed with the Florida Dept. of S</u>	State) 🕳	
P02000112789			: بې	
	(Document Number o	of Corporation (if known)	19	
Oursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts	the following amendment(
A. If amending name, enter the new n	ame of the corporation:			
N/A			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association,"	Corp." "Inc," or "Co"	A professional corporation name	e abbreviation "Corp.,"	
B. Enter new principal office address,	if applicable	1819 Main Street, Suite 400		
Principal office address MUST BE A S		Sarasota, Florida 34236		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1819 Main Street, Suite 400		
		Sarasota, Florida 34236		
D. If amending the registered agent an new registered agent and/or the ne			the	
Name of New Registered Agent	N/A	_		
	1819 Main Street, Suite 40	00	.	
	(Florida sti	reet address)		
New Registered Office Address:	Sarasota	. Flor	34236	

☐ 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)

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>	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		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	lditional sheets.	additional Ar . if necessary).	(Be specific)	<u>-</u> .			
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lf an ame	ndment provid	des for an exc	hange, reclass	sification, or	cancellation	of issued shar	es,	
provision	ns for impleme	enting the am	endment if no	t contained	in the amend	ment itself:		
(if no	ot applicable, it	ndicate N/A)						
4								
	_							· ·
							·————	

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	N/A	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed. N/A		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors wi	hout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes can fficient for approval.	st for the amendment(s)
	proved by the shareholders through voting groups. each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for appr	oval
by		."
,	(voting group)	_
Dated, Signature(By a d	19/2022 rector, president br other officer – if directors or o	fficers have not been
selecte	1, by an incorporator – if in the hands of a receiver ed fiduciary by that fiduciary)	
	Todd M. Sweet	
	(Typed or printed name of person signi	ng)
	President	
	(Title of person signing)	