P0300011450

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BECRETARY OF STAFE.





COVER LETTER

TO: Amendment Section Division of Corporatio	ns		
NAME OF CORPORATI	on: Elizabe	eth Thomso. 20011450	n,P.A.
DOCUMENT NUMBER:	P0300	00011450	
The enclosed Articles of Art	nendment and fee are su	abmitted for filing.	
Please return all correspond	ence concerning this ma	atter to the following:	
	Eli	zabeth Bri	ooks
	Elizak	Name of Contact Person	P.A.
		Firm/Company Willow Co	
	orland	do FL 3a	835
		City/ State and Zip Code	e
	2ab5	City/ State and Zip Code 720@gmail.	20m
	E-mail address: (to be u	sed for future annual report	notification)
For further information con-	cerning this matter, pleas	se call:	
Elizabeth	Brooks	at (407	, 375-3767
Name of Co	ntact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	343.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A			Address
	ent Section	Amendment Section	
P.O. Box	of Corporations	Division of Corporations Clifton Building	
	ee, FL 32314		xecutive Center Circle
rananassee, I L J2J17			

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

Elizabeth Brooks, P.A.

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

P03000011450

(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:

its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation: Elizabeth Broo	KS, P.A. The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association." or the abbreviation	n," "company," or "incorporated" or the abbreviation 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>)	4461 Willow Cove Court Orlando, FL 32835
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4461 Willow ove Court Orlando, FL 32835
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address. Name of New Registered Agent Elizobe	
44(e) Willow (Florida stra	COVECOURT
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Re	

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P,D	Elizabeth Brooks	4461 Willow cove Ct
X Add			Orlando, FL 32835
Remove			
2) Change	PD	Elizabeth Thomson	8002 Glitter Court
Add			orlando, PL 32836
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Arti</u>	icles, enter change	(s) here:		
(Attach additional sheets, if necessary).	(Be specific)		•	
N/A			•	
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. If an amendment provides for an exch	ange, reclassificat	ion, or cancellation	of issued shares,	
provisions for implementing the amer	adment if not cont	ained in the amendi	nent itself:	
tif not applicable, indicate N/A)	1 / A			
\sim	'/A			
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			SIE	
	-			

The date of each amendment(s) adoption: March 7, 2016, if other than t
date this document was signed.
Effective date <u>if applicable</u> :
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records.
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 March 7,2016
Signature Elizabeth Brooks
(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)
Elizabeth Brooks
(Typed or printed name of person signing)
President
(Title of person signing)