P0300014683

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| Office Use Only |
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: _C | HANGE NAME FROM M | ATTHEW CRAIG KES | TERSON INC. |
|--|--|--|---|
| | TO MATTHEW . CRAIN | KESTERSON, P.A. | |
| DOCUMENT | | | |
| The enclosed A | tricles of Amendment and fee are | submitted for filing. | |
| Please return al | Il correspondence concerning this a | natter to the following: | |
| | MATTHEW C. | KESTERSON | |
| | (Name | e of Person) | |
| | MANNAGEM MARCI | US & MILLICHAP | |
| <u>-</u> - | (Name of I | Firm/ Company) | |
| | 5900 N. ANDREWS | AVENUE, STE. 1 | 00 |
| _ | (A | ddress) | |
| _ | FORT LAUDERDA | LE, FL. 33309 | |
| For further info | ormation concerning this matter, pl | ease call: | |
| M ATT | KESTERSON | _at (561) 702. | |
| | (Name of Person) | (Area Code & Daytime | Telephone Number) |
| Enclosed is a c | heck for the following amount: | | |
| \$35 Filing Fee | ☐ \$43.75 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 | |

Articles of Amendment to
Articles of Incorporation of

FILED

04 MAR 29 PM 4: 29

MATTHEW CRAIG KESTERSON, LINKASSEE, FLORIDA (Name of corporation as currently filed with the Florida Dept. of State)

| P0300014683 |
|--|
| (Document number of corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| NEW CORPORATE NAME (if changing): |
| MATTHEW CRAIG KESTERSON, P.A. |
| (must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
| ARTICIT IT |
| THE SPECIFIC POLPOSE IS DUAL ESTATE SALES. |
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| (Attach additional pages if necessary) |
| If an amendment provides for 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) |
| |
| |
| |

(continued)

| The date of each amendment(s) adoption: MARCH 26, 2004 | | | | |
|--|--|--|--|--|
| Effective date if applicable: MARCH 26, 2004 (no more than 90 days after amendment file date) | | | | |
| (no more than 90 days after amendment file date) | | | | |
| Adoption of Amendment(s) (CHECK ONE) | | | | |
| The amendment(s) was/were approved 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. | | | | |
| Signed this 26 day of MARCH, 2004. MATTHEW C. KESTERSON | | | | |
| Signature MATTHEW C. KESTERSON PRESIDENT | | | | |
| (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) | | | | |
| MATTHEW C. KESTERSON | | | | |
| (Typed or printed name of person signing) | | | | |
| PRESIDENT (Title of person signing) | | | | |

FILING FEE: \$35