## P030000 20370

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: THOMAS A. BAS	TIAN, CPA, P.A.			
DOCUMENT NUMI	BER: P03000020370				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Thomas Bastian				
	Name of Contact Person				
	Thomas A. Bastian, P.A.				
	<del></del>	Firm/ Company			
	361 N. University Drive, Ap	t 512			
	Address				
	Plantaion, FL 33324				
		City/ State and Zip Code			
	tom@bastiancpa.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Thomas Bastian		at (	716-0707		
Name of Contact Person Area Code & Daytime Telephon			le & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ortment of State:		
S35 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 assee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

THOMAS A. BASTIAN, CPA, P.A.

(Name of Corporation as currently	r filed with the Florida Dept. of State)
P03000020370	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
THOMAS A. BASTIAN, P.A.	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	<u>ν/Α</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ess in Florida, enter the name of the
Name of New Registered Agent	N/A
(Florida str	cet address)
New Registered Office Address:	(City), Florida(Zip Code)
	(City) (Zip Cont)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	: with and accept the obligations of the position.
	egistered Agent, if changing
Signature of New R	egistered Agent, if changing

Check if applicable

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	, A
$\underline{X}$ Remove	<u>V</u>	Mike Jones	N/A
<u>X</u> Add	<u>\$V</u>	Sally Smith	/ • / /
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			<u> </u>
Remove 3) Change		<del>-</del> -	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
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6) Change			
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tach additional sheets, if necessary)					
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in amendment provides for an ex	hange, reclass	ification, or can	<u>cellation of issue</u>	i shares.	
rovisions for implementing the an (if not applicable, indicate N/A)	<u>iendment if no</u>	t contained in th	e amendment its	e <u>II:</u>	
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	1/1/2024	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
[/] Effective date <u>if applicable</u> :	/2024	
rifiective date <u>if applicable</u> .	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac action was not required.	lopted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	it for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	THOMAS A. BASTIAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	