## P0300031127

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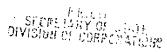
## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: LIGGETT, VOGT	r & WEBB, P.A			
DOCUMENT NUM	D02000021127				
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	DEREK M WEBB				
		Name of Contact Person	1		
	LIGGETT, VOGT & WEBB, P.A.				
		Firm/ Company			
	1500 GATEWAY BLVD, SI	JITE 202			
		Address			
	BOYNTON BEACH, FL 33	426			
	<del></del>	City/ State and Zip Cod	e		
DEB	EKW@LVWCPA.COM				
DEN	•	sed for future annual report	- Control of the cont		
For further information	on concerning this matter, pleas	se call:			
DEREK M. WEBB		561 at (	752-1721		
Name	Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
\$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		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



LIGGETT VOGT & WEBB, P.A.

15 DEC 21 PH 1: 16

(Name of Corporation as cul	rrently filed with the Florida Dept. of State)
P03000031127	
(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
LIGGETT & WEBB, P.A.	The new
	oration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation nume must contain the
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)	
	<del></del>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	
Signature of i	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: 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 Onc)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	D	CARL VOGT	432 PARK AVE S	
Add			10TH FLOOR	
X Remove			NEW YORK, NY 10016	
2) Change				
Add				
Remove				
3) Change				
Add		ts.		
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

man againstant success, if necessary).	ticles, enter change(s) here: (Be specific)
<del></del>	
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares.
prawrated two was babl	endment if not contained in the amendment itself:
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orovisions for implementing the ame (if not applicable, indicate N/A)	
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	
rovisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	CD14DED 14 2016	construction by
DE Effective date <u>if applicable</u> :	CEMBER 14, 2015	DIVISION OF COME SALET
•	(no more than 90 days after amends	15 DEC 21 PM 1: 16
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing epartment of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes ca ufficient for approval.	st for the amendment(s)
	proved by the shareholders through voting groups. reach voting group entitled to vote separately on t	
"The number of votes cas	t for the amendment(s) was/were sufficient for appr	roval
by		,,
•	(voting group)	
action was not required.	lopted by the board of directors without shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder acti	on and shareholder
Dated/2/ Signature/	14/15	
selecti	Afrector, president or other officer – if directors or or or or of the directors of a receiver the fiduciary by that fiduciary)	r, trustee, or other court
	Derck M. Webb (Typed or printed name of person sign	ing)
	Porsi dest	g,
	(Title of person signing)	