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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION	Fudge & McArthur	, P.A.		
DOCUMENT NUMBER: PO				
The enclosed Articles of Ame.	adment and fee are su	bmitted for filir	ıg.	
Please return all corresponden	ce concerning this mat	ter to the follow	wing:	
Donna	Fudge			
		Name of Co	ntact Person	
Fudge !	Broadwater, PA.		ŀ	<u>.</u>
	 ,	Firm/ C	ompany	
650 16	h St. N			
		Ade	lress	
St. Pete	rsburg, Fl 33705			
		City/ State a	nd Zip Code	
-glenus@fudg	sbroadwater.com	glenuses	fudgence	arthur. cou
	mail address: (to be us	ed for future ar	nual report	notification)
For further information concer	ning this matter, pleas	e call:		
Gayle Lenas		at (_	727	_) 490-2912
Name of Conta	ct Person		Area Co	le & Daytime Telephone Number
Enclosed is a check for the fol	lowing amount made j	payable to the F	lorida Depa	rtment of State:
	\$43.75 Filling Fee & Certificate of Status	□\$45.75 Fitt Certified C (Additional enclosed)	lopy copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee.	Section Corporations 27		Amendi Divisio Clifton 2661 E:	Address ment Section n of Corporations Building cecutive Center Circle ssee, FL 32301

Articles of Amendment Articles of Incorporation of

Fudge & McArthur, P.A.	
(Name of Corporation as currently file	ed with the Florida Dept. of State)
P03000061022	
(Document Number of Cor	porațion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
Fudge Broadwater, P.A.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", word "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	hlt.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
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 Name of New Registered Agent	in Florida, enter the name of the
(Florida street a	ddaas
New Registered Office Address. (City	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the signature of New Regis	and accept the obligations of the patient. W 25 Patered Agent, if changing
Signature of New Regio.	Control of Changing

address of each Officer (Attach additional sheets Please note the officer/di P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	and/or D i, if necess frector titl President = Chief I er, Directo I in the fo	Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Directo Financial Officer. If an officer/director hol or would be PTD. Howing manner. Currently John Doe is liste corporation, Sally Smith is named the V and	n officer/director being removed and title, name, and r: TR= Trustee: C = Chairman or Clerk: CEO = Chief is more than one title, list the first letter of each office id as the PST and Mike Jones is listed as the V. There is S. These should be noted as John Doe, PT as a Change,
Example: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

__ Remove

If amending or adding additional Articles, enter change(s) h Attach additional sheets, if necessary). (Be specific)	iere:
W/4	
f an amendment provides for an exchange, reclassification, provisions for implementing the amendment if not contains	or cancellation of issued shares, ed in the amendment itself:
(if not applicable, indicate N/A)	
NIA	
<u> </u>	

The date of each amendment(s) adoption:	1-22-18	, if other than the
late this document was signed. Effective date if applicable:	18	
Effective date if applicable:	(no more than 90 days after o	amendment file date)
Note: If the date inserted in this block does no locument's effective date on the Department of		y filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a		otes cast for the amendment(s)
☐ The amendment(s) was/were approved by th must be separately provided for each voting	e shareholders through voting g group entitled to vote separate	oups. The following statement by on the amendment(s):
"The number of votes cast for the amer	ndment(s) was/were sufficient f	or approval
by	ting group)	.,,
☐ The amendment(s) was/were adopted by the action was not required.	***	cholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without sharehol	der action and shareholder
Dated - 13-18	8	
Signature(By a director, pres	sident or other officer – if direct orporator – if in the hands of a	tors or officers have not been receiver, trustee, or other court
	Donna Judge	
- "	(Typed or printed name of pers	
	President /	Registered Agent
	(Title of person sig	n i ng) 🗡