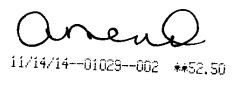
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10.8 11 (21/14

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	on: <u>Karen</u>	P. Mento	or, P.A.
DOCUMENT NUMBER:	P03000	112767	, page 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
The enclosed Articles of Am	nendment and fee are sub	mitted for filing.	
Please return all corresponde	ence concerning this matt	er to the following:	
		Name of Comaci i ci	2n+0/
	Kare	P. Men	tor, P.A.
			tor, P.A. Parkway Suite450
	Stu	City/ State and Zip Co	34994 ode
	KPMIN torce E-mail address: (to be use	905 FON and of future annual repo	d menter. Com ort notification)
For further information conc			
Karun	mentor	at ( 77.	2) 214-2648 Code & Daytime Telephone Number
Enclosed is a check for the f			
☐ \$35 Filing Fee	2\$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)
P.O. Box	nt Section of Corporations	Ame Divi Clift 2661	et Address endment Section sion of Corporations ton Building Executive Center Circle ahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Karen P. Mentor, P.A.	FILEU /
(Name of Corporation as currently filed with the Florida Dept. of Stat	
P03000 112767	2814 NOV 14 PH
(Document Number of Corporation (if known)	TALL STATE
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:	oration adopts the following amendment(s) to ORIL
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional word "chartered," "professional association," or the abbreviation "P.A."	
(Principal office address MUST BE A STREET ADDRESS)  Sui	<u>Central Parkway</u> te 450 t, FL 34994
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  10 SE  Suit	Central Parkway 4 450 ++, FL 34994
D. If amending the registered agent and/or registered office address in Florida, entenew registered agent and/or the new registered office address:	r the name of the
Name of New Registered Agent  10 SECLINIAL PKWY, Sta  (Florida street address)  New Registered Office Address:  (City)	1) 14 450 Florida34994
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the o	
Signature of New Registered Agent, if changing	<del></del>

<b>.</b>		•	
address of each Officer (Attach additional sheets, Please note the officer/dit P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or D if necess rector title President = Chief in r, Directe lin the fo eves the c	eary)  le by the first letter of the office title:  l; T= Treasurer; S= Secretary; D= Director; TR= Tr.  Financial Officer. If an officer/director holds more the  or would be PTD.  Ilowing manner. Currently John Doe is listed as the P  orporation, Sally Smith is named the V and S. These si	ustee; C = Chairman or Clerk; CEO = Chief ian one title, list the first letter of each office ST and Mike Jones is listed as the V. There is
X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove			10 SE CENTRUPKLLY Suive 456 Sturt, FC 34994
2) Change Add Remove			
Change Add Remove	<del></del>		
4) Change Add Remove			
5) Change Add Remove			
6) Change		_	

Page 2 of 4

ch additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
	<del>- • -</del>
	, <u></u>
1.4T	
amendment provides for an exch visions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
_	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment fil	e date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	
"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 action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
Dated 11-11-2014	
Dated 11-11-2014 Signature	
(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, truste	e, or other court
appointed fiduciary by that fiduciary)	
KAREN P. MENTOR	
(Typed or printed name of person sign	ing)
PRESIDENT	
(Title of person signing)	