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A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CO | ORPORATION: Robin F Frydman i | PA | · | | | | |
|-------------------|--|--|---|--|--|--|--|
| DOCUMENT | ከስ ለስስስስስስ ለፀኃ | | | | | | |
| The enclosed A | rticles of Amendment and fee are su | bmitted for filing. | | | | | |
| Please return all | l correspondence concerning this ma | tter to the following: | | | | | |
| | Robin Schall | | | | | | |
| | - | Name of Contact Person | | | | | |
| | Robin F Frydman PA | | | | | | |
| | Firm/ Company | | | | | | |
| | 5461 N. University Dr. #104 | | | | | | |
| | Address | | | | | | |
| | Coral Springs, FL 33067 | | | | | | |
| | | City/ State and Zip Cod | <u></u> | | | | |
| | robinfrydmanschallesq@gma | il.com | | | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | | | |
| For further info | rmation concerning this matter, pleas | se call: | | | | | |
| Robin Schall | | at (<u></u> 954 | 554-2211 | | | | |
| | Name of Contact Person | | de & Daytime Telephone Number | | | | |
| Enclosed is a cl | neck for the following amount made | payable to the Florida Depa | artment of State: | | | | |
| \$35 Filing | Fee □\$43.75 Filing Fee & Certificate of Status | S43.75 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 Division The Co 2415 i | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | | | | |

Articles of Amendment to Articles of Incorporation of



Robin F. Frydman PA (Name of Corporation as currently filed with the Florida Dept. of State) 30 PM 12: 4 P04000000482 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmen its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Law Offices of Robin Frydman Schall, P.A. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (Cire) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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, r 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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each c 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 a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as c 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 | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | _ | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | eets, if necessary). | (be specific) | | | |
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| f an amandmant or | ovides for an evel- | | | | |
| f an amendment proprovisions for imple | ementing the amen | ange, rectassifica | tion, or cancellar | ion of issued sha | ares, |
| (if not applicable | e, indicate N/A) | idilicii ii iiot col | itamed in the am | enament itsen: | |
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| The date of each amendment(s date this document was signed. | adoption: $\frac{8/2L/2l}{}$, if other |
|---|---|
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Note: If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filing requirements, this date will not be list Department of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| ☐ The amendment(s) was/were action was not required. | adopted by the incorporators, or board of directors without shareholder action and shareholde |
| ■ The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. |
| ☐ The amendment(s) was/were must be separately provided | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes c | ast for the amendment(s) was/were sufficient for approval |
| by | |
| | (voting group) |
| 8/26/21 Dated | |
| Signature | R |
| (By a selec | director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary) |
| | Robin F. Schall |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |