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15 JAN 20 AV III: 30

JAN 23 2015 R. WHITE

COVER LETTER

TO: Amendment Section

Division of Cor	porations		
NAME OF CORPO	_{DRATION:} Charlie Ma	rtinez, P.A.	
DOCUMENT NUM	_{IBER:} P0400003264	2	
The enclosed Article	es of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Christine Martine	Z	
		Name of Contact Person	n
	Martinez Roman	Goehl, P.A.	
		Firm/ Company	
	8005 NW 155th 9	Street Suite A	
		Address	
	Miami Lakes, Flo	rida 33016	
		City/ State and Zip Cod	e
ch	ristine@mrgdefens	se com	
		sed for future annual report	notification)
		ou in rataro amani reperi	inviniouni,
For further informati	on concerning this matter, pleas	se call:	
Carlos Marti	nez, Jr.	at (305	827-9125
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	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)
	illing Address		Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

15 JAN 20 AM II: 39

(Name of Corporation as currently filed with the Florida Dept. of State) Charlie Martinez, P.A.

ent(s) to

(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Con</i> its Articles of Incorporation:	poration adopts the following amen	lme
A. If amending name, enter the new name of the corporation:		
Martinez Roman Goehl, P.A.	The	new
name must be distinguishable and contain the word "corporation," "company," of "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A profession word "chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbrevia	tion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
	0	
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, en new registered agent and/or the new registered office address:	ter the name of the	
Name of New Registered Agent		
(Florida street address)	·	
New Registered Office Address:	, Florida(Zip Code)	
(City)	(Zip Code)	
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 Pagistared 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.

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 One)	<u>Title</u>	<u>Name</u>	Address
1) Change		-	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Nw.
- WA
•

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/W
Y

· · · · · · · · · · · · · · · · · · ·

date this document was signed.	option.	, if other than the
Effective date <u>if applicable</u> :	01-01-2015	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated	15.2015	
Signature	(D)	
	rector, president or other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointe	ed fiduciary by that fiduciary)	
-	Carlos M. Marthyes (Typed or printed name of person signing)	_
	owner officer	
-	(Title of person signing)	_