## P14000083360

(Red	questor's Name)	
(Add	dress)	
(riac		
(Add	dress)	
(City	//State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
(00)	,	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



300042141663

Amend Mc

19/28/04--01011--002 \*\*35.00

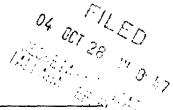
FILED (9.5 s)

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Immigration, Inc.			
DOCUMEN	T NUMBER: P04000083360		
The enclosed	i Articles of Amendment and fee ar	e submitted for filing.	
Please return	all correspondence concerning this	s matter to the following:	
	Robert Ariel Stiberman, Esq.		
	(Name o	f Contact Person)	angang gang Mariah panggang panggan pa
	(C:	n/Commont)	
		n/ Company)	
	18851 N.E. 29 Ave. Suite 789		
	(	Address)	
	Aventura, Florida 33180		
	(City/ Sta	te/ and Zip Code)	
For further in	nformation concerning this matter, p	please call:	
Robert Ariel S	······································	at ( 305 ) 491-7301	
	(Name of Contact Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a	check for the following amount:		
<b>Z \$</b> 35 Filing Fe	ee S43.75 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	Street Address Amendment Section Division of Corpora 409 E. Gaines Street Tallahassee, FL 323	tions

## Articles of Amendment to Articles of Incorporation of



Immigration, Inc.

P04000083360

(Name of corporation as currently filed with the Florida Dept. of State)

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Immigration P.A.
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
REGISTERED AGENT: Robert Ariel Stiberman
18851 N.E. 29 Ave. Suite 789, Aventura, FL 33180
OFFICER/DIRECTOR DETAIL: Robert Ariel Stiberman - President/ Director
18851 N.E. 29 Ave. Suite 789, Aventura, FL 33180
TITLE: President
PURPOSE: Law Firm - Practice limited to immigration law.
· · · · · · · · · · · · · · · · · · ·
(Attach additional pages if necessary)
f an amendment provides for 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)
(continued)

The date of each amendment(s) adoption: 10/26/2004			
Effective date if applicable:	10/26/2004		
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) the amendment(s)	was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.		
	was/were approved by the shareholders through voting groups. The at must be separately provided for each voting group entitled to vote amendment(s):		
"The number o	f votes cast for the amendment(s) was/were sufficient for approval by		
**************************************	(voting group)		
	was/were adopted by the board of directors without shareholder action was not required.		
The amendment(s) shareholder action	was/were adopted by the incorporators without shareholder action and was not required.		
Signed this <u>26<sup>+5</sup></u> day of	0 tob., 2004		
Signature	8AD		
selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)		
Rob	ert Ariel Stiberman		
<del></del>	(Typed or printed name of person signing)		
Pres	ident		
	(Title of person signing)		

FILING FEE: \$35