P04000107609

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COVERLETTER NAME CHANGE ONLY

Tallahassee, FL 32303

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Sunago CPA Grou	p. PA	
	MBER: P04000107609		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Brian R Biggs		
	· · · · · · · · · · · · · · · · · ·	Name of Contact Persor	
	Sunago Advisory Group, Inc.		
		Firm/ Company	
	136 Lake Mist Dr	· · · · · · · · · · · · · · · · · · ·	
	·	Address	· · · · · · · · · · · · · · · · · · ·
	Bastrop, TX 78602		
		City/ State and Zip Code	
	brian.biggs@sunago.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Brian R Biggs		at (512	657-9666
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 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)
A D P.	Mailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Sunago CPA Group, PA

(Name of Corporation as curre	ently filed with the Florida De	pt. of State)	
P04000107609			
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	his <i>Florida Profit Corporation</i> :	adopts the followi	ng amendment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>		
Sunago Advisory Group, Inc.			The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporation		ion "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
		 	2
			
C. Enter new mailing address, if applicable:			86 77
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			55
		. ,	-0 17
			=
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		ame of the	6
			
Name of New Registered Agent			-
(Florid	a street address)		_
		· ·	
New Registered Office Address:	(City)	Florida /Zip	Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		ons of the position.	
Thereo, accept the appointment as regimered agent. Tampanin	an and accept the company	me ny me pamaram	
Simulation of Ma	Desistand Apart if shareing		
Signature of ive	w Registered Agent, if changing	i	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)(e) FS		
ine amendment(s) is are being their pursuant to s. 007.0120 (11) (0), 1.3.		

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	1 A			
X Add	<u>sv</u>	Sally Smith	$\mathcal{N}_{I,I}$,			
Type of Action (Check One)	Title	Name	·	<u>Addres</u> s		
1) Change	·					-
Add						-
Remove					2020 OCT	[]
2) Change						
Add					•	: : Ti
Remove 3) Change						<u></u> つ
Add					. 40	_
Remove						
4) Change						_
Add						_
Remove						
5) Change						-
Add						_
Remove				<u> </u>		
6) Change						-
Add						_
Remove						

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n amendment provi	des for an exchange, reclassification, or cancella	ation of issued shares.
ovisions for implem (if not applicable, i	enting the amendment if not contained in the an	nendment itself:
(у пог аррисате, і	iaicae ivaj	
	N.A	
	MA	<u></u>
<u> </u>		
		- ·

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
Effective date if applicable:	~1.A	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date timent of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.)
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	[] [2020 OCT 16
by	(voting group)	5
	(voting group)	يسويت
10/15/2020 Dated		PH 12: 5
	n Biggs CPA, MAN	~, O
selected, b	tor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
Br	an R Biggs	
-	(Typed or printed name of person signing)	
Pri	esident	
	(Title of person signing)	