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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	TON: ACCURATE & PE	ROMPT APPRAISALS, II	NC.			
DOCUMENT NUMBER	P04000156349					
The enclosed Articles of A	Imendment and fee are su	bmitted for filing.				
Please return all correspon	dence concerning this ma	tter to the following:				
RIC	CHARD M. MOGERMAN	N. ESQ.				
	Name of Contact Person					
RIC	RICHARD M. MOGERMAN, P.A.					
		Firm/ Company				
821	8211 WEST BROWARD BOULEVARD, SUITE 200					
		Address				
PL	PLANTATION, FLORIDA 33324					
		City/ State and Zip Co	de			
MARKM	OG@BELLSOUTH.NET					
	E-mail address: (to be us	sed for future annual repor	t notification)			
For further information co	neerning this matter, pleas	e call:				
RICHARD M. MOGERN	IAN, P.A.	954	475-7171			
Name of C	ontact Person	Area C	ode & Daytime Telephone Number			
Enclosed is a check for the	e following amount made [	payable to the Florida Dep	partment 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)			
Amendn Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Amen Divisi Clifto 2661	t Address  Idment Section  Idm			

## Articles of Amendment to Articles of Incorporation of

FILED

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ACCURATE & PROMPT APPRAISALS, INC. (Name of Corporation as currently filed with the Florida Dept. of State LAHASSEE, FLORIDA P04000156348 (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: A. If amending name, enter the new name of the corporation: LUIS A. CONSUEGRA, 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 (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 Registered 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.

Example:

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<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			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
CORPORATE PURPOSE:	
REAL ESTATE AGENT	
-t	
<u>.</u>	
F. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
N/A	
	}

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 file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
MAY 14, 2018	
Signature	
(By a director, president or other officer – if directors of officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
LUIS A. CONSUEGRA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	