Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000262733 3)))



H220002627333ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN

Account Number : I20020000140 Phone

: (561)844-3600

Fax Number

: (561)842-4104

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN STEINGER ISCOE & GREENE, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

AUG 0 5 2022

Tallahassee, FL 32314

K22000262 7333

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: STEINGER ISCO	E & GREENE, P.A.				
DOCUMENT NUM	006000016001					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	GREGORY R. COHEN, ESC	Q.				
	Name of Contact Person					
	Cohen Norris Wolmer Ray T	elepman Berkowitz Cohen				
		Firm/ Company				
	712 U.S. Highway One, Suite	e 400				
		Address				
	North Palm Beach, FL 33408	}				
		City/ State and Zip Code	 .			
	SGREENE@INJURYLAWY	'ERS.COM				
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
Karin Drakas		at (561) 844-3600 de & Daytime Telephone Number			
Name	of Contact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a check fo	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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				

H220002627333

Articles of Amendment to Articles of Incorporation of

STEINGER ISCOE & GREENE, P.A.

		~0	
(Name of Corporation as currently filed with the Florida Dept. of State)		مغلد	4255
P05000026992	• •	Ε.	
(Document Number of Corporation (if known)		دي	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folits Articles of Incorporation:	lowing am	endmen	ıt(s) to
A. If amending name, enter the new name of the corporation:			
		new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must a "chartered," "professional association," or the abbreviation "P.A."	eviation "C contain the	orp.," word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
	<u> </u>		
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:			
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the posi	tion.		
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.

H 220602627333

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)

Example:

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>\$v</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Namc</u>	<u>Addreş</u> s
1) X Change	P/D	MICHAEL S. STEINGER	1645 Palm Beach Lakes Blvd
Add			9th Floor
Remove			West Palm Beach, FL 33401
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Ramove			

	if necessary).	(Be specific)			
					
				·	
					
				·	
					
				·	
				·	
					
f an amendment provid	les for an excha	nge, reclassificat	ion, or cancella	tion of issued sh	ares.
f an amendment provid provisions for impleme	nting the amend	dment if not con	tained in the am	endment itself:	
	dicate N/A)				
(if not applicable, in					
(ij noi applicable, in					
(tj noi applicaole, in					
(tj noi applicaole, in				<u>.</u>	
(y noi appitcaole, in					
(y noi appiicaoie, in					
(y noi appiicaoie, in					
(ij noi appitcaoie, in					
(ij noi appitcaoie, in					
(ij noi appitcaoie, in					

The date of each amendment(s) a date this document was signed.	doption:		, if other than the
Effective date if applicable:			
	(no more than 9	00 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D		cable statutory filing requirements, this dat	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad action was not required.	pted by the incorporators, or	board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s		e number of votes cast for the amendment(s	;)
		rough voting groups. The following stateme vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/we	ere sufficient for approval	
by			
	(voting group)		
AUGUST Dated	5, 2022		
		ul Steinger	
selecte	rector, president or other offi	oernation of the court of the c	
	MICHAEL S. STEINGER		
	(Typed or printed	name of person signing)	
	PRESIDENT / DIRECTOR		
	(Title of person si	gning)	