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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Professions	al Advisory Grou	ıp Inc.
DOCUMENT NUMBER: P0500008029	3	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Howard C. Angel	oni Jr.	
	Name of Contact Persor	1
Angeloni Tax Adv	isory Group Inc	
- 	Firm/ Company	
410 S Ware Blvd	Ste 410	
 	Address	
Tampa, Fl 33619		
	City/ State and Zip Code	
ataxadvisory@yahoo	o.com	
	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
Louise Seamen	at (813	, 628-8008
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\Bigcup \\$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 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation

Articles of Articles of Articles of Incompared of Office of Incompared of Office Offic	See Po wer
Professional Advisory Group Inc.	
(Name of Corporation as currently filed with the Fl	lorida Dept. of State)
P05000080293	
(Document Number of Corporation (if	'known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Angeloni Tax Advisory Group Inc.	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Gword "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	410 S. Ware Blvd Ste 410
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tampa, FI 33619
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	410 S. Ware Blvd Ste 410 Tampa, FI 33619
D. If amending the registered agent and/or registered office address: Name of New Registered Agent N/A	
(Florida stre	eet 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 w	vith 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 <math>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	<u>PT</u>	John Doc	
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		<u>n/a</u>	
Add			
Remove			
2) Change		n/a	
Add			
Remove			
3) Change		<u>n/a</u>	
Add			
Remove			
4) Change		n/a	
Add			
Remove			
5) Change		n/a	
Add			
Remove			
6) Change		n/a	
Add			
Remove			

E. If amending or adding additional Articles	s, enter change(s) here:
(Attach additional sheets, if necessary). (E	Be specific)
n/a	
-	
E. If an amandment provides for an evaluate	ge, reclassification, or cancellation of issued shares,
provisions for implementing the amenda	nent if not contained in the amendment itself:
(if not applicable, indicate N/A)	The Continues in the whenches haden
n/a	
11/G	
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The date of each amendment(s) a	September 1st, 2012
Effective date <u>if applicable</u> : <u>n/</u>	a
<u>парричале</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	" (voting group)
	(voting group)
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
_{Dated} Septe	mber 11th, 2012
Signature	director, president or other officer – if directors or officers have not been
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Howard C. Angeloni Jr.
	(Typed or printed name of person signing)
	President
	(Title of person signing)