P05000114893

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Law Offices of Roberts, P.A. P05000114893 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: H. Clay Roberts Name of Contact Person Law Offices of Roberts, P.A. Firm/ Company 113 Almeria Ave. Address Coral Gables, FL 33134 City/ State and Zip Code roberts@robertspa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 Area Code & Daytime Telephone Number H. Clay Roberts Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Law Offices of Roberts, P.A.				
(Name of Corporation	on as currently file	d with the Florida Dep	ot. of State)	
P05000114893				
(Docum	ent Number of Cor	poration (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Flori	da Profit Corporation :	idopts the following a	mendment(s) to
A. If amending name, enter the new name of the co	rporation:			
Roberts & Basnuevo, P.A.			TI	he new
name must be distinguishable and contain the word "co." Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A pro	any," or "incorporated fessional corporation	" or the abbreviation ' name must contain t	'Corp.,'' he word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>			
D. If amending the registered agent and/or register new registered agent and/or the new registered of		n Florida, enter the na	ame of the	
Name of New Registered Agent				
Hume of New Negateren Agent				
	(Florida street ac	ldress)		
V D : 100 AH			. Florida	
New Registered Office Address:	(City,)	Zip Cod	!e)
				2027 c
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	istered Agent: I am familiar with a	and accept the obligatio	ns of the position.	
			<u>:</u>	
Signa	ture of New Regist	ered Agent, if changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	Javier A. Basnuevo	113 Almeria Ave.
X Add			Coral Gables, FL 33134
Remove			····
2) Change			
Add			
Remove 3) Change			
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

= **	(Be specific)
	•
	<u> </u>
	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f 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:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s)	adoption:	, if other than the
	15/2022	
Effective date if applicable:	(no more than 90 days after amena	ment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filir lepartment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac action was not required.	lopted by the incorporators, or board of directors v	vithout shareholder action and shareholder
■ The amendment(s) was/were ac by the shareholders was/were	lopted by the shareholders. The number of votes of ufficient for approval.	east for the amendment(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups reach voting group entitled to vote separately on	s. The following statement the amendment(s): 20 20 20 20 20 20 20 20 20 20 20 20 20
"The number of votes cas	t for the amendment(s) was/were sufficient for ap	proval
by	(voting group)	·"
	(10011860014)	
09/15/202 Dated	2	÷
Signature	N. Cal	; _t -
select	director, president of other officer – if directors or ed, by an incorporator – if in the hands of a receiv nted fiduciary by that fiduciary)	
	H. Clay Roberts	
	(Typed or printed name of person sig	ning)
	President	
	(Title of person signing)	