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TO: Amendment Section Division of Corporations

NAME OF CORPO	Steven S BRATION: Steven S BRED. P050001574		P.A.		
	s of Amendment and fee are su				
	espondence concerning this ma	-			
	Steven S. Leskovich				
		Name of Contact Perso	<u> </u>		
	Steven S. Lesk				
		Firm/ Company			
	265 E. Marion	Avenue, Suite	e 112		
		Address			
	Punta Gorda, F	FL 33950			
		City/ State and Zip Cod	e		
ste	even@southern	iustice com			
		sed for future annual report	notification)		
		•	•		
For further information	on concerning this matter, pleas	se call:			
Steven S.	Leskovich	_{at (} 941	575-5100		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	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 Street Address				
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation

FILED 14 OCT -3 PM 1:49

Steven S. Leskovich, P.A.

A. TALEARY OF STATE.

(Name of Corporation as currently filed with the Florida Dept. of State) P05000157479 (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: Leskovich Law Group, 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." 265 E. Marion Ave. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 112 Punta Gorda, FL 33950 C. Enter new mailing address, if applicable: 265 E. Marion Ave. (Mailing address MAY BE A POST OFFICE BOX) Suite 112 Punta Gorda, FL 33950 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: N/A Name of New Registered Agent N/A (Florida street address) New Registered Office Address: (City) 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:	15 /15		
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)	Title	Name	<u>Addres</u> s
1) Change	<u> </u>	N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artical (Attach additional sheets, if necessary).	cies, enter change(s) nere: (Be specific)
/A	
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(g not applicable, intactale 147A)	

The date of each amendment(s) a date this document was signed.	adoption: October 1, 2014	, if other than the
·	ctober 1, 2014	
Enterire date in applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were acby the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	at for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated Octobe	r 1, 2014	
select	director, president or other officer if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	_
	Steven S. Leskovich	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	-