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COVER LETTER

TO: Amendment Sectio Division of Corpor					
NAME OF CORPORA	TION: Colton & Hill,	P. A.			
DOCUMENT NUMBE	R: 706000000401				
The enclosed Articles of	Amendment and fee are submitted for filing.				
Please return all corresp	ondence concerning this matter to the following:				
	Kathryn Hill				
_	Colton & Hill	Person P. A.	-		
	Firm/ Compa	°ce #200	_		
_	Address	7 20017	-		
_	Vero Beach, F	-L 32960	_ = = :::		
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	Katchill@ Kathrynhil	lpa.com	٠,	رب ني	* ~ 4 A
	E-mail address: (to be used for future annual r	eport notification)	~ 1,		yat y
For further information	concerning this matter, please call:			<u>က</u> ယ	j sva G
Katl	rryn Hill at 77	12, 567-1900	Diring The	28	
Name of	Contact Person Ar	ea Code & Daytime Telephone Numbe	er		
Enclosed is a check for	he following amount made payable to the Florida	Department of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fe Certified Copy (Additional copy)	Certificate of Status			

enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation

Colton & Hill, P.A.	The second second
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
706000000401	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</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:	
NA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Cword "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent Rath 411	DIO 10 = 1/2 1/2
(Florida stre	Place, Suite 200
New Registered Office Address: Vero B	each, Florida 32960 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiarly Signature of New Registered A	ith and accept the obligations of the position L gent, 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:	iore, and buny simin, i	уг из ин нии.	
X Change	PT John Do	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	nes	
X Add	SV Sally Sr	nith_	
Type of Action (Check One)	Title	Name	Address
1) Change	VPS	Paige Colton	Vero Beach, FL 3296
Remove 2) Change Add		Kathryn Hill	
Remove 3) Change Add			
Remove 4) Change Add			3: 28 MF AIF A
Remove 5) Change Add			
Remove 6) Change			
Add			.

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
A/N			
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	Sin.	28	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	1.		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
NA			
			

The date of each amendment(s) adoption: October 8, 2014 date this document was signed.	, i	if other	than th
notohor a soul			
Effective date if applicable: (no more than 90 days after amendment file date)			
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):	nt		
"The number of votes cast for the amendment(s) was/were sufficient for approval			
by"			
(voting group)	4		•
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	r <u> </u>	16.11.91	* (2°74)
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	. •	<u></u>	Transmitted
Dated 10 14 14		મું સુ સુ 2	7
Signature Karry Jul	HIA HIA	Ó	
(By a director, president or other officer – if directors or officers have not been			
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	i		
(Typed or printed name of person signing)			
(Typed or printed name of person signing)			
President			
(Title of person signing)			