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COVER LETTER

TO: Amendment Section Division of Corporations

•		
NAME OF CORPORATION: Kovach &		P.A
DOCUMENT NUMBER: P0600048	188	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Michael T. Kov	/ach, Jr., Esqu	uire
Kovach Law F	Name of Contact Persor irm, P.A.	1
P.O. Box 635	Firm/ Company	
	Address	<u>-</u>
Inverness, FL	34451	
	City/ State and Zip Code	е
jltucker.kovachlav	vfirm@gmail.c	om
	sed for future annual report	
For further information concerning this matter, plea	se call:	
Michael T. Kovach, Jr., or Jennifer L. T	ucker at 352	341-5557
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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 Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Flor	ida Dept. of State)		
P06000048188			· · · · · · · · · · · · · · · · · · ·	_
(Document Number	of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this Flo	orida Profit Corporation ad	opts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
Kovach Law Firm, P.A.				The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	orp," "Inc," or "Co	". A professional corpora		
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)		_		_
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<i>BOX</i>)			_
· •				
				- 80 SE
D. If amending the registered agent and/or registered agent and/or the new registered		s in Florida, enter the nan	ne of the	BECHETARY BECHETARY BECHETARY
Name of New Registered Agent				77 5 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1
	(Florida street	address)		TME RATIO
New Registered Office Address:		, Florida_		_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		h and accept the obligation.	s of the position.	
Signature of	New Registered Ag	ent, if changing		

If amending the Officer's 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: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change	-	_		
Add				
Remove				
4) Change				
Add				
Remove				
5 a				
5) Change		<u> </u>		
Add				·
Remove				
6) Change		<u> </u>		
Add				
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	
	-
Market Market Control of the Control	
11 NE	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, malcule 1971)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11/13/2013	
Signature (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)	
Michael T. Kovach, Jr.	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_

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