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11 JUN 20 AM II: OF SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	O'Brien Bower, P.A.	
DOCUMENT NU	J MBER:	P06000049625	
The enclosed Artic	cles of Amendment and f	be are submitted for filing.	
Please return all co	orrespondence concerning	this matter to the following:	
	Tir	nothy F. Bower Rodriguez	
		Name of Contact Person	
	(D'Brien Rodriguez, P.A.	
		Firm/ Company ,	
	5	1 W. Bay St., Suite 330	
		Address	
		Tampa, FL 33606	
		City/ State and Zip Code	
		@obrienbower.com used for future annual report notification)	
For further inform	ation concerning this mat	ter, please call:	
Timoth	y F. Bower Rodriguez	at (813)250-3533	
Name	of Contact Person	Area Code & Daytime Telephone Number nt made payable to the Florida Department of State:	
	_		
M \$33 Filing Fee	Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	sed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations		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 of

OBNE	en Bower, P.A.	11 JUN 20
(Name of Corporation as cur	rently filed with the Florida Dept. of	State PASORE LABOR AM 11.
P06	6000049625	TALLAHASSEE STA
(Document Nu	mber of Corporation (if known)	State) JEURETARY OF STA
result to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:		
If amending name, enter the new name	of the corporation:	
O'Brie	n Rodriguez, P.A.	The new
me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or the must contain the word "chartered," "pr	ne designation "Corp," "Inc," or "Co	". A professional corporation
Enter new principal office address, if ap		
rincipal office address <u>MUST BE A STRE</u>	<u>ET ADDRESS</u>)	
		
Enter new mailing address, if applicable	e:	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
(Mailing address MAY BE A POST OFF	<u>ICE BOX</u>)	
	registered office address in Florida,	enter the name of the
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida,	enter the name of the
(Mailing address MAY BE A POST OFF	registered office address in Florida,	enter the name of the
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in Florida, tistered office address:	enter the name of the
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida,	enter the name of the
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in Florida, sistered office address: (Florida street address)	enter the name of the

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Timothy F. Bower	511 W. Bay St. #330 Tampa, FL 33606	☐ Add ☑ Remove
<u>D</u>	Timothy F. Bower Rodrigue 2.	511 W. Bay St. #330 Tampa, FL 33606	☑ Add ☐ Remove
2	DIBries Mark J	h 1. 11	Add Remove
(attach addi Article VII of	ig or adding additional Articles, enter c itional sheets, if necessary). (Be specific f the Articles of Incorporation of the	hange(s) here: c) Corporation is hereby amer	nded in its
its entirety a			
	and/or directors of the corporation		
Title: D Na	me: MARK J.O'BRIEN Address:	511 W. BAY ST # 330, TAMF	PA, FL 33606
Title: D Na	me: TIMOTHY F. BOWER RODRI	GUEZ Address: 511 W. BA	Y ST # 330,
		TAMPA, FL	33606
provisions	ndment provides for an exchange, reclass for implementing the amendment if neapplicable, indicate N/A)		

The date of each amendmen	t(s) adoption: <u>06/16/2011</u>
Effective date <u>if applicable</u> :	06/16/2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
` ,	ere approved by the shareholders through voting groups. The following statement ed 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)
, ,	ere adopted by the board of directors without shareholder action and shareholder
action was not required.	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_6/16	6/2011
Signature_	
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Timothy F. Bower Rodriguez
	(Typed or printed name of person signing)
	Director
	(Title of person signing)