P06000081935

(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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1 ALBRITTON:

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: OFFICE OF ARC	HITECTURE AND DESIG	GN INC	
DOCUMENT NUM	BER: P06000081935			
The enclosed Articles	of Amendment and fee are so	ubmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	ROB ZINN			
		Name of Contact Perso	n	
	ZINN ARCHITECTURE A		•	
				
	Firm/ Company 1022 PARK STREEF #205			
		Address	<u> </u>	
	JACKSONVILLE, FL 32204			
		City/ State and Zip Cod	e	
ROB	ZINN@ GMAIL.COM			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	n concerning this matter, plea	se call:		
ROB ZINN		904 at (352-1203	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment 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)	
Ame Divî P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Divisio Clitton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301



July 22, 2019

ROB ZINN 1022 PARK STREET #205 JACKSONVILLE, FL 32204

SUBJECT: OFFICE OF ARCHITECTURE AND DESIGN INC.

Ref. Number: P06000081935

We have received your document for OFFICE OF ARCHITECTURE AND DESIGN INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the legal name on form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 419A00014890

Articles of Amendment to . Articles of Incorporation of

		Amendment Sy	·.	
		ncorporation	· · · · · · · · · · · · · · · · · · ·	
(1) 17 (1) (2)		of		
OFFICE OF ARCHITECTURE AND L			- 19/3.57	
	of Corporation as currer	tly filed with the Florida Dept. of State)	5,5/	
P06000081935				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 60' its Articles of Incorporation:	7.1006. Florida Statutes, thi	s Florida Profit Corporation adopts the follow	ing amendment(s) to	
A. If amending name, enter the new r ZINN ARCHITECTURE AND INTER				
			The new	
name must be distinguishable and co. "Corp" "Inc" or Co" or the desig word "chartered," "professional associ	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the "Co". A professional corporation name mus "P.A."	abbreviation t contain the	
B. Enter new principal office address	. if annilcable:	1022 PARK STREET #205		
Principal office address MUST BE A STREET ADDRESS		JACKSONVILLE, FL 32204		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1022 PARK STREET #205		
		JACKSONVILLE, FL 32204		
				
 If amending the registered agent a new registered agent and/or the ne 	nd/or registered office add w registered office addres	dress in Florida, enter the name of the		
Name of New Registered Agent	DUB AIZZ.	<u>~.</u>		
	1022 PARK STREET #2	05		
	(Florida s	treet address)	_	
New Registered Office Address:	JACKSONVILLE	, Florida 32204		
			Code)	
New Registered Agent's Signature, if c	shanging Dugitas at A	.		
hereby accept the appointment as regis	manging Registered Agen tered agent. I am familiar	<u>t:</u> with and accept the obligations of the position.		
•		, salamay in pounton.		
	<i>n</i>		_	
	Signature of New 1	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: \underline{X} Change	PT	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) X Change	P	KASSIA ZINN	1466 PINE GROVE AVENUE
Add			JACKSONVILLE FL 32205
Remove			
2) Change			
Add			
Remove			
3)Change	<u></u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
රා Change			
Add			
Remove			

	adding additional Ar al sheets, if necessary)	i. (Be specific)	•		
					
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an amendmen	t provides for an exc	hanas maslaadilla		1	
**************************************	mplementing the am	endment if not con	itained in the am	<u>ion of issued snare</u> endment itself:	<u>s.</u>
provisions for i	icable, indicate N/A)			matter testa.	
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The date of each amendment(s) addate this document was signed	option:	, if other than the
Effective date <u>if applicable</u> :	· .	
	(no more than 90 days after amendment file date)	
Note : If the date inserted in this b document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appromust be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required. The amendment(s) was/were adop	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder	
action was not required.		
7-12-2019		
Dated		
Signature		
(By a dia	enor, president or other officer - if directors or officers have not been	
selected appointe	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
<u>.</u>	ZINN, ROBERT JR.	
	(Typed or printed name of person signing)	
1	.b	
-	(Title of person signing)	