PO6 000084804

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2021 JAH 12 AM 10: 55 SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Law Offices of We	lls Olah, P.A.					
DOCUMENT NUMB	ER: P06000084804						
	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
	Kevin T. Wells, Esq.						
-	Name of Contact Person						
	Law Offices of Wells Olah, P.A.						
-		Firm/ Company					
	1800 Second Street, Suite 808						
-	Address						
	Sarasota, FL 34236						
-	City/ State and Zip Code						
	kwells@kevinwellspa.com						
-	E-mail address: (to be us	sed for future annual report	notification)				
For further information	concerning this matter, pleas	se call:					
Kevin T. Wells, Esq.	_	941 at (_) 366-9191				
Name o	f Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:				
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2021 JAN 12 AH 10: 55

Law Offices of Wells/Olah, P.A.

(Name of Corporation as currently	filed with the Florida-Dept ofistate) (IF STATE
P06000084804	IALL ANARSES, FL
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F_0 its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Law Offices of Wells Olah Cochran, P.A.	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	. Florida
(0	Tity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi Signature of New Registered Agent:	th and accept the obligations of the position. gistered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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: X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>\$V</u>	Sally Sr	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

ticle 1: Nam	is hereby changed to state as follows:	
ne name of th	corporation is:	
"Law (Offices of Wells Olah Cochran, P.A.	
		_
		·
		_
<u> </u>		
provisions	ment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
 -		
•		
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· ·		

	January 1, 2021	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	uary 1, 2021	
Effective date <u>if applicable</u> :	t on t is a standard to the	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	nt(s)
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	rment
"The number of votes ca	a for the amendment(s) was/were sufficient for approval	
	,,	
by	(voting group)	
selec	director, president or other officer – if directors or officers have not bee ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	Kevin T. Wells	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	