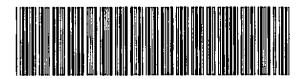
## PO6000149965

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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J 2-11.43

## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: CHRISTINA MOR	RRISON, P.A.			
DOCUMENT NUM	BER:				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	CHRISTINA MORRISON				
	Name of Contact Person				
	CHRISTINA MORRISON, P.A.				
	Firm/ Company				
	335 LINTON BLVD., #B-142120				
	Address				
	DELRAY BEACH, FL 3348	3			
		City/ State and Zip Cod	le		
	CHRISTINADELRAY@GM	IAIL COM			
	<del>-</del>	sed for future annual report	notification)		
	is man address. (15 55 as				
For further informati	on concerning this matter, pleas	se call:			
MICHAEL ROBERT FLAM, ESQ.		at (	504-3406		
Name	of Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check f	or 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amen Divisi	Address dment Section on of Corporations Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CHRISTINA MORRISON P.A.

CHRISTINA MORRISON, F.A.	or Clad with the Floride Port of State)
P06000149965	y filed with the Florida Dept. of State)
	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	11/AThe new
name must be distinguishable and contain the word "corporation," "a "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". 2 "chartered," "professional association." or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	- MA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NiA
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	H-1/1
	vet address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	i with and accept the obligations of the position.
NIA	
Signature of New R	egistered Agent, if changing
ZN to Manualfacture	

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 <math>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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add		$\wedge$	
Remove 3 ) Change			
Add		( \ \ \ \ \	
Remove		$\cap \cap \cap$	
4) Change			
Add		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)		
ARTICLE VI, captioned PURPOSE FOR WHICH CORPORATION IS ORGANIZED, is amended and restated as follows		
so it now only states:		
To engage in all real estate brokerage services, as a Broker, that are authorized under Chapter 475 of the Florida Statutes.		
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		

August 11, 2022	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
// 200	
Effective data if applicable:	
Effective date if applicable: (M.M.) (no many than 00 days of an amy drant file date)	<del></del>
(no more than 90 days after amendment file date)	
V	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da	te will not be listed as the
document's effective date on the Department of State's records.	
•	
Adoption of Amendment(s) (CHECK ONE)	
(2)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder actions.	on and shareholder
	on and shareholder
action was not required.	
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.	
.,	
$\square$ The amendment(s) was/were approved by the shareholders through voting groups. The following statement	ent
	<i>,,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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)	
August 11, 2022	
Dated	
(hente (PALL)	
Signature ////TUNA //WVIGOT	
(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 cour	1
appointed fiduciary by that fiduciary)	
appointed fluidiary by that fluidiary)	
Christina Morrison	
Cilistina Motrison	
(Typed or printed name of person signing)	<del></del>
(a yped of printed name of person signing)	
President	
1 TEMILUIT	
(Title of person signing)	
( i inic of person signing)	