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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MICHELLE	e A. Estlund, P.A.
DOCUMENT NUMBER: P0600 155	5849
The enclosed Articles of Amendment and fee are sub	
Please return all correspondence concerning this mat	•
rease return an correspondence concerning dus mat	ter to the following.
<u> </u>	le Estlund
	Name of Contact Person
<u>Michel</u>	
	Firm/ Company
1413	sevilla avenue
^	Address
Coral (Gables, FL 33134
	City/ State and Zip Code
a a a c c c l u a	ad Death adday com
F-mail address: (to be us	ed for future annual report notification)
E han dadress. (to be de	
For further information concerning this matter, pleas	a call:
ror further finormation concerning this matter, pleas	e can.
Michelle Estland	at (305) 448-0077
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup\$43.75 Filing Fee &	
\$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status
•	(Additional copy is Certified Copy
	enclosed) (Additional Copy is enclosed)
	is chelosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section 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

Elject Joka

to

Michelle A. t	<u> STUNA, P.A.</u>
(Name of Corporation as currently filed with	the Florida Dept. of State)
P040001	55849
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporatio	n;
ESTIUND LOW, P.A.	The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A B
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	<u>R</u>
(Flori	ida street address) .
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligations of the position.
Signature of New Regist	ered Ageni. 11 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 <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.

Example: X Change	<u>PT</u>	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>	<u>Address</u>
1) Change Add		NIA	
Remove			
2) Change Add			
Add Remove			
3) Change Add			
Remove			
4) Change	·		
Add Remove			
5) Change Add			
Remove			
6) Change			
Add			
Remove			

(attach additional	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)	
	N/A	
		
· · ·		
 		
		
provisions for in	provides for an exchange, reclassification, or cancellation of issued shares, applementing the amendment if not contained in the amendment itself: cable, indicate N/A)	
	N/A	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: MOY 24, 2012
Effective date if applicable: 18,2 in more than 90 days after amendment file date)
Sept. 18,20 (2
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)
☐ 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 5-24-2012
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)
Michelle A. Estlund
(Typed or printed name of person signing)
P, VP, S, T.
(Title of person signing)