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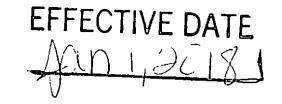
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Ossi, Withers & H	larrison, P.A.	
DOCUMENT NUM	0.07000001313		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Susan M. Ossi		
		Name of Contact Person	1
	Ossi Withers, P.A.		
		Firm/ Company	
	5618 NW 43rd Street		
		Address	
	Gainesville, Florida 32653		
		City/ State and Zip Cod	e
sus	an@owhlaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Susan M. Ossi		at (692-4888
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	☐S43.75 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)
<u>M</u>	lailing Address	Street	Address
	mendment Section		lment Section
	ivision of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee FL 32314			Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Ossi, Withers & Harrison, P.A.

(Name (of Corporation as curren	tly filed with the Florida De	pt. of State)	
P07000091213				
·	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following amendment	t(s) t
A. If amending name, enter the new na	ame of the corporation:			
Ossi Withers, P.A.			The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpo-	porated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		5618 NW 43rd Street		
		Gainesville, Florida 3265	3	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5618 NW 43rd Street		
	(muning unitess <u>MAT BE AT OST OTTTCE BOX</u>)		3	
		·		
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent			ume of the	
	5618 NW 43rd Street			
	(Florida s	treet address)		
New Registered Office Address:	Gainesville		, Florida 32653	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agen	ıt:		
l hereby accept the appointment as regist			ns of the position.	
			€1	
	Signature of New	Registered Agent, if changing	- 201 - 201	

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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	Susan M. Ossi	5618 NW 43rd Street
Add			Gainesville, Florida 32653
Remove			
2) X Change	VD	Richard I. Withers	5618 NW 43rd Street
Add			Gainesville, Florida 32653
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
	·
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y noi appacaoie, maicaie 1974)	

The date of each amendment(s) as date this document was signed.	doption:, if other than th
Janı	ary 1, 2018
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
December	27, 2017
Dated	
Signature//	lirector, president or other officer – if directors or officers have not been
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
	Richard I. Withers
	(Typed or printed name of person signing)
	Vice President and Director
	(Title of person signing)