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## **COVER LETTER**

TO: Amendment Section Division of Corporations



Tallahassee, FL 32303

NAME OF CORE	PORATION: Lyons, Snyder & C	ollin, P.A.			
DOCUMENT NU	MBER: P07000110108				
	les of Amendment and fee are sub	omitted for filing.			
Please return all co	rrespondence concerning this mat	ter to the following:			
	Philip Snyder				
		Name of Contact Persor	1		
	Lyons & Snyder, P.A.				
		Firm/ Company			
	1250 South Pine Island Road,	#200			
Address					
	Plantation, FL 33324				
	-	City/ State and Zip Code	Ċ		
	LT Characteristics				
	philip@lyonssnyder.com	ed for future annual report			
	12-mail address, (to be us	ed for tuture annual report	Hormeanony		
For further informs	ttion concerning this matter, pleas	e call:			
Philip Snyder		ut (	462.8035		
Nar	ne of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a cheel	k for the following amount made p	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	■\$43.75 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

## Articles of Amendment to Articles of Incorporation of

Lyons, Snyder & Collin, P.A.

(Name	of Corporation as current	ly filed with the Flor	ida Dept. of State)	
P07000110108				
	(Document Number o	of Corporation (if know	wn)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpo	ration adopts the followin	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
Lyons & Snyder, P.A.				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co"	A professional corpo		
B. Enter new principal office address,	if applicable:	N/A	,	: i
(Principal office address MUST BE A S				····
				<del>-;</del>
C. Enter new mailing address, if appl		N/A		元 の
(Mailing address MAY BE A POST	OFFICE BOX)			62
				<u></u>
D. If amending the registered agent ar			r the name of the	
new registered agent and/or the ne	<u>w registered office addres:</u> N/A	<u>s:</u>		
Name of New Registered Agent	IVA			_
	· · · · · · · · · · · · · · · · · · ·		·	-
	(F forida SI	reet address)		
New Registered Office Address:		(City)	, Florida	Code)
		•	·	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			bligations of the position.	
, , , , , , , , , , , , , , , , , , , ,	,	,		
	Signature of New 1	Registered Agent, if ch	anving	-

Check if applicable

<sup>■</sup> 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: $\underline{X}$ 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>Addres</u> s
1) Change	VP	Sean Collin	1250 South Pine Island Road, #200
Add			Plantation, FL 33324
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change		<del>-</del>	
Add			
Remove			
5) Change			
Add			
Remove			<del> </del>
6) Change			****
Add			
Remove			

	or adding additional A mal sheets, if necessary,	). (Be specific)				
N/A						
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				-		
F. If an amenda	nent provides for an ex or implementing the ar	<u>cchange, reclassifi</u>	cation, or cancella	ition of issued shar	re <u>s,</u>	
(if not a)	plicable, indicate N/A)	nenament it not c	ontained in the ar	nenument usen.		
N/A						
		<del></del>		<del></del> .		

The date of each amendment(s) adoption:date this document was signed.	ocro86n	1,202	~>	, if other than the
Effective date <u>if applicable</u> :				
	(no more than 90 da	ys after amendmei	u file date)	
<b>Note:</b> If the date inserted in this block does a document's effective date on the Department of		statutory filing re	equirements, this date	will not be listed as the
Adoption of Amendment(s) ( <u>Cl</u>	HEÇK ONE)			
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators, or boar	d of directors with	out shareholder action	and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		mber of votes cast	for the amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each voting				t
"The number of votes cast for the amo	endment(s) was/were st	ifficient for appro-	val	
by				
(17)	oting group)			
Dated	20 C G	_		
Signature	10/1/			<u></u>
selected, by an inc	sident or other officer – corporator – if in the ha ry by that fiduciary)			
	94 - P	SMIDE	r	
	$P(H \subseteq P)$ (Typed or printed name	e of person signin	g)	
	(Title of person signing	1, 9.		
	(Title of person signing	g)		