P07000118310

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C. LEWIS

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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations				
NAME OF CORPORATION: FLYNN (CASTANEDA 8	& CO CPA PA		
DOCUMENT NUMBER: P07000118	3310			
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
CONNI GIBSO	ON			
YEEND GIBS	Name of Contact Person			
Firm/ Company 1109 S CONGRESS AVENUE				
WEST PALM BEACH FL 33406				
	City/ State and Zip Cod	e		
CONNIGIBSON@GMAIL.COM				
E-mail address: (to be	used for future annual report	notification)		
For further information concerning this matter, ple	ase call:			
CONNI GIBSON	at (561	, 642-4200		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made	e payable to the Florida Depa	artment of State:		
\$35 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

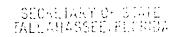
Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

14 APR 30 PM 3: 16



FLYNN CASTANEDA & CO CPA PA

(Name of Corporation as currently filed with the Florida Dept. of State)
P07000118310
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation: YEEND, GIBSON, FLYNN & CO CPA PA The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
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 in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if 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 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>Addres</u> s
Change	<u></u>		
Add Remove			
2) Change Add			
Remove			
3) Change			
Add			
Remove			
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)			
	· · · · · · · · · · · · · · · · · · ·			
F. If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,			
provisions for implementing the am	endment if not contained in the amendment itself:			
(if not applicable, indicate N/A)				



The date of each amendmen	t(s) adoption: 2/1/2014	14 APR 30 PM 3: 16	, if other than the
date this document was signed		SEURE IARCH OF LARGER TALLAHASSET PUTBERA	
Effective date if applicable:		2/1/2014 (no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
	re adopted by the shareholders. There sufficient for approval.	e number of votes cast for the amendment(s)	
		ough voting groups. The following statement vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/we	re sufficient for approval	
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of directors	s without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators wit	hout shareholder action and shareholder	
Dated_ <mark>4/28</mark>	3/2014		
	(Inhana)		
S		icer – if directors or officers have not been ne hands of a receiver, trustee, or other court	
	CONNI GIBSON		
	(Typed or	printed name of person signing)	
	VP		
	<u>(T</u>	itle of person signing)	