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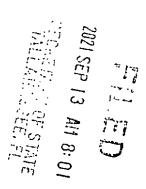
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A. Butler

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: LAW OFFICE OF HENRY HERNANDEZ, P.A. DOCUMENT NUMBER: P07000124646 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HENRY HERNANDEZ Name of Contact Person LAW OFFICE OF HENRY HERNANDEZ, P.A. Firm/ Company 2655 S. LeJeune Road, Suite 802 Address Coral Gables, Fl 33134 City/ State and Zip Code Henry@hhlawflorida.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 771-3374

Area Code & Daytime Telephone Number HENRY HERNANDEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Mailing Address Street Address

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

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LAW OFFICE OF HENRY HERNANDEZ, P.A.

	tion as currently filed with the Florid 74 9 5 6 4!1 8: 01
P07000124646	WC0
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Floric its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the o	corporation:
GARCIA HERNANDEZ, P.A.	The _new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	
. "	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
	ered office address in Florida, enter the name of the
D. If amending the registered agent and/or registered new registered agent and/or the new registered	
new registered agent and/or the new registered	
new registered agent and/or the new registered	
new registered agent and/or the new registered Name of New Registered Agent	l office address:
new registered agent and/or the new registered	(Florida street address)
Name of New Registered Agent	(Florida street address) , Florida
new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address:	(Florida street address) , Florida (City) (Zip Code)
new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent Signature, if changing Registered Agent's Signature, if changing Registered	(Florida street address) (City) , Florida (Zip Code)
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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)

Example:

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	Carla I. Garcia	2655 S. LeJeune Road, Suite 802
X Add				Coral Gables, Fl 33134
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
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5) Change		_		
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6) Change		_		
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	ets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, this e Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder a	ction and shareholder
■ The amendment(s) was/were by the shareholders was/wei	adopted by the shareholders. The number of votes cast for the amendme re sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	rment
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	· ·	
	(voting group)	
Septem Dated	ber 1, 2021	
	16 4	
Signature(Bv	a director, president or other officer – if directors or officers have not bee	en
selv	ected, by an incorporator – if in the hands of a receiver, trustee, or other co	ourt
арр	ointed fiduciary by that fiduciary)	
	Henry Hernandez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	