P080000020893

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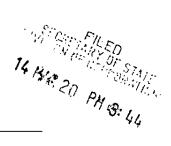
103/20/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	he Father	's Law Group, P	P.A.	
DOCUMENT NUMBER: P08000020893				
The enclosed Articles of Amendm	ent and fee are su	bmitted for filing.		
Please return all correspondence co	oncerning this man	tter to the following:		
Felicia	M. William	IS		
		Name of Contact Person	n	
The Fa	ther's Law	Group, P.A.		
		Firm/ Company		
Post O	ffice Box 4	7388		
		Address		
Tampa	, Florida 3	3646		
		City/ State and Zip Cod	e	
fmwilliams	esq@gma	il.com		
		ed for future annual report	notification)	
For further information concerning this matter, please call:				
Felicia M. Williams		at (813	, 944-9495	
Name of Contact P	erson	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
_	75 Filing Fee & ficate 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)	
Mailing Addres	Mailing Address Street Address			
Amendment Section		Amendment Section		
•	Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			Ç	
Tallahassee, FL 32314 2661 Executive Center Circle				
Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of



The Father's Law Group, P.A.	· · · · · · · · · · · · · · · · · · ·
(Name of Corporation as currently filed	with the Florida Dept. of State)
P08000020893	
(Document Number of Cor	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo Fathers' Rights Law Firm, P.A.	ration:
name must be distinguishable and contain the word "c	corporation," "company," or "incorporated" or the abbreviation Inc." or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2255 Ashley Oaks Circle
(Principal office address <u>MUST BE A STREET ADDRE</u> .	Suite 101
*	Wesley Chapel, Florida 33544
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Post Office Box 47388
	Tampa, Florida 33646
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent Felicia M.	Williams
2255 Ashl	ey Oaks Circle, Suite 101
	(Florida street address)
New Registered Office Address: Wesley C	, rioriua
	(City) (Zip Code)

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 <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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional attach additional sheets, if necessor	ıry). (Be specifi	ic)		

, , , , , , , , , , , , , , , , , , , ,				
				
				
			,	
an amendment provides for an	exchange, reclas	ssification, or can	cellation of issued	shares,
provisions for implementing the (if not applicable, indicate N	<u>amendment if ne</u>	ot contained in th	e amendment itse	<u>lf:</u>
(у пот аррисавие, таксате т	21)			
, · · · · · · · · · · · · · · · · · · ·				
	·			
				

The date of each amendmen date this document was signed	t(s) adoption: 3/14/2014	, if other than the
Effective date if applicable:	3/14/2014	
in inplicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
hy	·"	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_3/14	4/2014	
Signature _	- Muthans	
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Felicia M. Williams	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	