P08000030024

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CPA Associates of	Florida, PA	·	
DOCUMENT NUM	BER:			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Gladys Riccobono			
		Name of Contact Person	1	
	CPA Associates of Florida, F		•	
		Firm/ Company	410-0-1	
	8695 College Pkwy Ste 1120	• •		
		Address		
	Fort Myers, FL 33919	Address		
		0. 70 . 17. 0. 1		
		City/ State and Zip Cod	e	
glad	ys@riccobonocpa.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Gladys Riccobono		239	985-4245	
Name of Contact Person		Area Co) 985-4245 de & Daytime Telephone Number	
P. 1 C	and the Calling San area and assume	manufata en elea Elanida Dani	and and and Charles	
Enclosed is a check re	or the following amount made	payable to the rionda Depa	arthenro State.	
\$35 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)	
Ma	iling Address		Address	
Am	endment Section	Amendment Section		
	Division of Corporations		Division of Corporations Clifton Building	
	D. Box 6327 Jahassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

CPA Associates of Florida, PA (Name of Corporation as currently filed with the Florida Dept. of State) P08000030024 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

its Articles of Incorporation:

		The
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "C ord "chartered," "professional association," or	Corp," "Inc," or "Co". A professio	or "incorporated" or the abbrevi nal corporation name must contai
Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u> .		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E ROY	
maning markets MATT BEATT OF TOTAL		
	***************************************	,
If amending the registered agent and/or reg new registered agent and/or the new register		ter the name of the
——————————————————————————————————————		ter the name of the
		ter the name of the
new registered agent and/or the new registe	ered office address: (Florida street address)	ter the name of the Florida

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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
X Change	P	Gladys Riccobono	15560 Sonoma Dr
Add			Apt # 204
Remove			Fort Myers, FL 33908
2) Change	v	Richard DeStefano	2/825 Palm Beach Blvd
X Add		-	Apt # 117
Remove			Fort Myers, FL 33916
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	, ,		
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	
. If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	90% while allocating a 10% interest to Richard DeStefano

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)
Note: If the date inserted in this block does not meet the applicable statutory tiling requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by" (voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
12/03/2015 Dated
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Gladys Riccobono
(Typed or printed name of person signing)
President
(Title of person signing)