## P08000035520

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(Ad	ddress)	
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(C	ity/State/Zip/Phone	e #)
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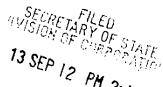
## **COVER LETTER**

Division of Corporations
SUBJECT: SEWART D WILLIAMS, P.A.  Name of Corporation
DOCUMENT NUMBER: P 0 8 0000 3 5 5 20
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ST2WART D. WILLIAMS Name of Contact Person
HUNTER, WILLIAMS JLYNCH PA. Firm/Company
2977 Mc FARLANE ROAD 5. 301 Address
MIAMILEL 33133 City/State and Zip Code
WILLIAMS@ HUNTERWILLIAMS LAW. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stevent Lilliaul at (385) 443-6200 Name of Contact Person at (385) 443-6200 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35.00 Filing Fee Certificate of Status  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
Mailing Address: Street Address:

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



(Name of Corporation as currently filed with the Florida Dept. of State)  POS 000035520  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  LAW OFFICE OF STEWART D. WILLIAMS, P. A., 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)	
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	s. 301
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  SAME AS ABOUE	
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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	•			
Add				
Remove				
2) Change		<del></del>		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		<del></del>		
Remove				
Komovo				
6) Change	<u> </u>	<del></del>		
Add				
Remove				

tach additional sheets, if necessary).	(Be specific)	
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an amendment provides for an exch	anga realessification or	concellation of issued shares
rovisions for implementing the ame	ndment if not contained in	n the amendment itself:
(if not applicable, indicate N/A)	<u> </u>	
•		
		<del></del>

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)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast 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.	
Dated_ 8-25-2013	
Signature	
(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)	_
STZWART D. WILLIAMS (Typed or printed name of person signing)	_
DrzsIDzNT	_
(Title of person signing)	