## P080000 36464

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## COVER LEGITER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: AGATA M. MIST	RETTA, P.A.	
DOCUMENT NUM	949800003646	·	<del>_</del>
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	AGATA MISTRETTA		
		Name of Contact Person	1
	AGATA M. MISTRETTA, F	P.A.	
		Firm/ Company	
	16828 SW 137th Ave #1434		
		Address	<del></del>
	MIAMI, FL 33177		
		City/ State and Zip Code	2
	agatamistretta@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
AGATA MISTRET		at (	
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

## Articles of Amendment to Articles of Incorporation of

AGATA M MISTRETTA, P.A.					
( <u>Name</u>	of Corporation as curre	ently filed with the Flori	da Dept, of Stat	<u>e</u> )	
P08000036464					
	(Document Number	er of Corporation (if know	n)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7,1006, Florida Statutes, t	his <i>Florida Profit Corpor</i>	eation adopts the	following ame	ndment(s) t
A. If amending name, enter the new n	name of the corporation	<u>:</u>			
AGATA MISTRETTA, P.A.				The	new
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp," "Inc," or "Co".	. A professional corpor	orated" or the ab ation name mus	breviation "Co t contain the	orp.," word
B. Enter new principal office address. (Principal office address MUST BE A S		N/A		2022	
Trincipal office datatess progretic Ac	STREET ADDALSS )	<u> </u>		<u>_</u>	
				HA.	=
				SE	
C. Enter new mailing address, if app (Mailing address MAY BE A POST	licable:   OFFICE BOX)	N/A		3	Ö
			•	01:	
					<del>-</del>
D. If amending the registered agent a	nd/or registered office a	ddress in Florida, enter	the name of the		
new registered agent and/or the ne	w registered office addi	<u>'ess:</u>			
Name of New Registered Agent	N/A				
			····		
	(Florida	street address)			
New Registered Office Address:	N/A		lilozido		
<u>New Registered Office Address:</u>		(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if of the hereby accept the appointment as regis			liantions of the n		
nereby accept the appointment as regis	terea agem. Tum jamua	ағ жин аға ассері іне от	nganons oj me p	omnon.	
		N/A			
	Signature of Nev	w Registered Agent, if cha	mging		
Check if applicable					
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (1	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:

 $P = President; \ F = Vice\ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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 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
1) X Change	Р	AGATA MISTRETTA	16828 SW 137th Ave #1434
Add			Miami, FL 33177
Remove			
2) Change			
Add			
Remove Change		_	2022
Add			~ .
Remove			HASSE T
4) Change		_	سنبها محسب المرا
Add			<u> </u>
Remove			<b>5</b>
5) Change	-	<del>-</del>	
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)		-
N/A		-
	NALLATIASSEE.	てここ
	TORING S	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		
N/A		

. . .

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 document's effective date on the f	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adaction was not required.	lopted by the incorporators, or board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(ufficient for approval.	(s)
	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	FIL -5
by	(voting group)	AS -
06/28/202		7
Dated		1: 40
Signature	laco Wistreto	RIG. <b>5</b>
(By a c	linector, president or other officer - if directors or officers have not been	<del></del>
	ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	r <b>ı</b>
арроп		
	AGATA MISTRETTA	<u></u>
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	