

P08000042133

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03/29/10--01003--017 **35.00

EFFECTIVE DATE
04-01-10

FILED
10 MAR 29 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend N.C.
C.COULLETTE

MAR 31 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Molly Lewis Sasso, P.A.

DOCUMENT NUMBER: P08000042133

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Molly Lewis Sasso
Name of Contact Person

Molly Lewis Sasso, P.A.
Firm/ Company

11512 Lake Mead Ave, Suite 901
Address

Jacksonville, FL 32256
City/ State and Zip Code

mlewis@mollylewislaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Molly Lewis Sasso at (904) 642 4111
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Molly S. Lewis, P.A.

(Name of Corporation as currently filed with the Florida Dept. of State)

PO8000042133

(Document Number of Corporation (if known))

FILED
10 MAR 29 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Molly Lewis Sasso, P.A.

EFFECTIVE DATE
04-01-10

The 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)

11512 Lake Mead Ave
Suite 801
Jacksonville, FL 32256

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11512 Lake Mead Ave
Suite 801
Jacksonville, FL 32256

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:

Molly Lewis Sasso

11512 Lake Mead Ave, Ste. 801

New Registered Office Address:

(Florida street address)

Jacksonville, FL - Florida 32256

(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.

Molly Sasso

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>IDP</u>	<u>Molly Lewis Sasso</u>	<u>11512 Lakemead Ave</u> <u>Ste 801</u> <u>Jacksonville FL 32256</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

Name & address change only (same person)

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

F. 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)

All shares owned by Molly Lewis Sasso (same person as before, name change only)

The date of each amendment(s) adoption: 3/17/10
(date of adoption is required)
Effective date if applicable: 4/1/10
(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 3/17/10

Signature Molly L. Sasso
(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)

Molly L. Sasso
(Typed or printed name of person signing)

President
(Title of person signing)