## P08000057447

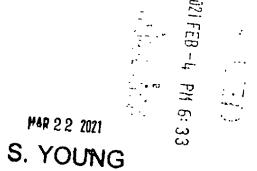
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## **COVER LETTER**

TO: Amendment Section

Division of Corpo	prations		÷4.		
NAME OF CORPOR	ATION: Shp	resa Idrizi	<u>Р. А.</u>		
DOCUMENT NUMB	DOCUMENT NUMBER: P 08000057447				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	3005	Name of Contact Person esa Idrizi Esa Idrizi Firm/ Company State Rd 5 Address Water, FL 3 City/ State and Zip Code	90 STE 202		
_	E-mail address: (to be us	idrizilaw. (on seed for future annual report	notification)		
Shpreso	i Idrizi Bottie	at (_727	, 458.3701		
Shpresa Idrizi Bottie at (727) 458.3701 Name of Contact Person Area Code & Daytime Telephor		de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## Articles of Amendment to

## Articles of Incorporation of

Showesa Tarizi PA

	JAPAG	filed with the Florida Der	/T.	<del></del>
(Name of Cor	· _		it. of State)	
<u></u>	P 0800001			
	Document Number of (	Corporation (if known)		
ursuant to the provisions of section 607.1006, s Articles of Incorporation:	Florida Statutes, this F	orida Profit Corporation a	dopts the following ame	ndment(s) to
If amending name, enter the new name o	f the corporation:			
Idr	izi Law Gro	up. P.A.	The	new
Idr ame must be distinguishable and contain the w Inc.," or Co.," or the designation "Corp," chartered," "professional association," or the	"Inc," or "Co". A	mpany," or "incorporated professional corporation	or the abbreviation "Coname must contain the	orp.," word
. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>		N/A		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		N/A		<u> </u>
D. If amending the registered agent and/or new registered agent and/or the new region Name of New Registered Agent	stered office address:	ss in Florida, enter the na		
	(Florida stree	t address)		
New Registered Office Address:	N/ A	City)	_, Florida	
	' (6	City)	(Zip Code)	
lew Registered Agent's Signature, if changi hereby accept the appointment as registered of	agent Lam familiar wi	th and accept the obligatio	ns of the position. 2021	• *** • • • • • • • • • • • • • • • • •
	Signature of New Reg	istered Agent, if changing		÷ ,

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (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)

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.

X Change	<u>PT</u>	John Doe		
X Remove	V	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) Change			N/A	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<u></u>	_		
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Remove				<u></u>
6) Change				
Add	<u>-</u> .			
Pamova				

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ın amendment j	provides for an exchange, reclassification, or cancellation of issued sha	res,
ovisions for im (if not applica	plementing the amendment if not contained in the amendment itself: ble, indicate N/A)	
	N/A	

. . . . .

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
-		
Effective date if applicable:	(no more than 90 days after amendment file de	nte)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shar	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the fficient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The followeach voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	2/2/2021 W/ Bitie	
Signature	/WV / Estici	
selected	rector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	ve not been or other court
	Shpresa Idrizi Bott	iv
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	