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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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All Marion Amend.

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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

Division of Corporations NAME OF CORPORATION: Davis are Mc Alhary, P.A P08000058195 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Enrily Konrick

Name of Contact Person Dowrs and McAlhary, P. & 1309 E. Robinsonst.
Address Orlando, P 32803 City/ State and Zip Code E-man auuress. (10 or future annual report notification) For further information concerning this matter, please call: Enry Krick at 407 894-1122

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: \$43.75 Filing Fee & Certificate of Status □ \$35 Filing Fee **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address**

Street Address

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

Articles of Amendment to Articles of Incorporation

At ticles 0	of	7	. 4
Davis and McAlhary, 1	P. A ·	>*	
(Name of Corporation as currently filed with t	he Florida Dept. of Stat	<u>te</u>)	3
70800058795			STATE OF STA
(Document Number of Corporati	on (if known)		6
ursuant to the provisions of section 607.1006, Florida Statutes, s Articles of Incorporation:	this Florida Profit Corp	oration adopts the fo	ollowing amendment(s
If amending name, enter the new name of the corporation			
Davis and Konicek, P.	4		The new
ame must be distinguishable and contain the word "corpor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," ord "chartered," "professional association," or the abbreviation. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	or "Co". A professiona	"incorporated" or al corporation name	the abbreviation must contain the
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA		
If amending the registered agent and/or registered office new registered agent and/or the new registered office add	tress: Lonuck	er the name of the	
1309 E. Rod (Florid New Registered Office Address: Orlando	da street address)	Florida 32	861
ew Registered Agent's Signature, if changing Registered A	gent:	, Florida 32 (Zip Ci	
hereby accept the appointment as registered agent. I am fami		obligations of the po	sition.
Cul Ko	nucl		
Signature of New Registe	red 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> <u>Jo</u>	<u>ihn Doe</u>	•
X Remove	<u>v</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	<u>P</u>	Enuly Konicik	1309 E. Robinson 8+ Ovarau, Fr 32801
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
	1. 0	
F. <u>If</u> <u>P</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	· AA	
	√	
	1	

The date of each amendment(s) add	option: 3/20/12
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder
•	uli Knek
(By a dire selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary) Lower Korneck (Typed or printed name of person signing)
_	(Title of person signing)