## P0900021236

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| _                                       |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| :                                       |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
| Special instructions to 1 ming Sincer.  |
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Office Use Only



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Amendjar

09 AUG 19 PM 2: 35

SECRETARY OF STATE GIVISION OF CORPORATIONS

## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

| Division of Corp                    | porations                                    | •  |   |
|-------------------------------------|--|--|---|
| NAME OF CORPO                       | RATION: First F                              | Florida Legal Group  | ), Inc.   |
| DOCUMENT NUM                        | BER: <u>P090000</u>                          | 28236  |   |
| The enclosed Articles               | s of Amendment and fee a                     | re submitted for filing.   |   |
| Please return all corre             | espondence concerning thi                    | s matter to the following:   |   |
| _                                   | Arthur Sin                                   | ame of Contact Person  | <del>,</del>  |
|                                     | First Florid                                 | Firm/Company   |   |
|                                     | 120 East Gran                                | Address  |   |
| <u>.</u>                            | Ormand Beach                                 | ity/ State and Zip Code  |   |
|                                     | E-mail address: (to be use                   | d for future annual report notification)                                   | <del></del>   |
| For further informati               | on concerning this matter,                   | please call:   |   |
| Ar Huw S<br>Name of                 | Contact Person                               | at ( <u>386</u> ) <u>212-5</u><br>Area Code & Daytime Tel                  | 166<br>lephone Number   |
| Enclosed is a check                 | for the following amount n                   | nade payable to the Florida Depar  | tment of State:   |
| \$35 Filing Fee                     | ☐ \$43.75 Filing Fee & Certificate of Status | Certified Copy (Additional copy is enclosed)                               | □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Add Amendment Division of O | Section<br>Corporations                      | Street Address Amendment Section Division of Corporations Clifton Building |   |

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

| Articles | of | Incorporation |
|----------|----|---------------|
|          |    | o.f           |

| of  | ON SECRETARY OF STATE  OUD INC OF AUD IN CORPORATIONS                               |
|---|---|
| First Florida Legal Gr  | oup, Inc. 09 AUS 19 PM 2: 35  |
| (Name of Corporation as currently filed with t  | the Florida Dept. of State) PM 2: 35  |
| P09000028236  |   |
| (Document Number of Corporati   | on (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:   | es, this Florida Profit Corporation adopts the following                            |
| A. If amending name, enter the new name of the corporatio   | <u>n:</u>   |
| The Simpson Law Firm, In name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association of the contain the word "corp." | orp," "Inc," or "Co". A professional corporation ation," or the abbreviation "P.A." |
| B. Enter new principal office address, if applicable:   | 120 E. Granoda Blad.  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | Ormand Beach, FL 32176  |
|   |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | 120 E. Granada Blod<br>Ormand Beach, FL 32176                                       |
|   | Ormand Beach , FL 32116   |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office aden Name of New Registered Agent:   |   |
| New Registered Office Address: (Flor  | ida street address)   |
| . (City)  | , Florida<br>(Zip Code)   |
|   |   |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam  | gent: iliar 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)

| <u>Title</u>     | Name  | •                   | <u>Address</u>                                    |                                     | Type of Action                        |
|------------------|---|---------------------|---|-------------------------------------|---------------------------------------|
|                  | <del></del>                                 |                     |   |                                     | ☐ Add<br>☐ Remove                     |
| <u> </u>         |   |                     |   |                                     | ☐ Add<br>☐ Remove                     |
|                  | ·   |                     |   |                                     | ☐ Add<br>☐ Remove                     |
| E. <u>If ame</u> | nding or adding addit                       | tional Articles, en | ter change(s) here                                |                                     |                                       |
|                  | additional sheets, if ne                    |                     |   |                                     |                                       |
|                  |   | ·                   |   | <u>.</u>                            |                                       |
|                  |   |                     |   | •                                   | <u></u>                               |
|                  |   |                     |   |                                     |                                       |
| <del></del>      |   |                     |   |                                     |                                       |
|                  |   |                     |   | <del></del>                         |                                       |
|                  |   |                     |   |                                     |                                       |
| provis           | amendment provides<br>sions for implementin | g the amendment     | reclassification, or ca<br>if not contained in th | ncellation of iss<br>te amendment i | ued shares,<br>tself:                 |
| (if              | not applicable, indica                      | te N/A)             | •   |                                     |                                       |
|                  |   | <del></del>         |   |                                     |                                       |
|                  | <u> </u>                                    |                     | <u> </u>  |                                     |                                       |
|                  |   |                     |   |                                     |                                       |
|                  |   |                     |   |                                     |                                       |
|                  |   |                     |   |                                     | · · · · · · · · · · · · · · · · · · · |

| The date of each amendment                          | (s) adoption: 8-15-09   |
|---|---|
|   | (date of adoption is required) 8-15-09 (no more than 90 days after amendment file date)   |
| Effective date if applicable:                       | 8-15-09   |
| • • •   | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                            | (CHECK ONE)   |
| The amendment(s) was/wer by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.  |
|   | re approved by the shareholders through voting groups. The following statement d 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/wer action was not required.   | re adopted by the incorporators without shareholder action and shareholder  |
| Dated   | -15-09  |
| Signature<br>(By<br>selec                           | a director, president cr other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary) |
|   | Arthur Simpsow (Typed or printed name of person signing)  |
|   | (Title of person signing)   |