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SECRETARY OF STATE
JIVISION OF COKPORATION

JUN 1 0 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	Vic Cuccia PA			
DOCUMENT NUMB	DO000053333				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
_		Victor Cuccia			
	Name of Contact Person				
	Vic Cuccia PA				
_		Firm/ Company			
	7616 Garibaldi Ct				
_	Address				
	Naples, FL 34114				
-	City/ State and Zip Code				
	E-mail address: (to be us	viccuccia@outlook. sed for future annual report	.COM notification)		
			······,		
For further information	concerning this matter, pleas	se call:			
	, i				
Victo	or Cuccia	at (239)417-3300		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street	Address		
	ndment Section	Amendment Section			
	ion of Corporations Box 6327	Division of Corporations			
	hassee FL 32314	Clifton Building			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2016 JUN -6 AM 8: 53

Vic Cuccia PA

TIC GUCCI	a r A
(Name of Corporation as currently	filed with the Florida Dept. of State)
PO900005	3333
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Victor Cuccia	ine new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or $Co.$," or the designation "Corp.," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent	ss in Florida, enter the name of the
(Florida street	address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th 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)

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>	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>		
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s	
1) Change		_			
Add					
Remove					<u> </u>
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add	•				
Aud Remove					
TENTO A C					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
···	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament is not contained in the amendment user:

The date of each amendment(s) add	option:	FILE I if other than the
date this document was signed.		SECRETARY OF STATES
Effective date <u>if applicable</u> :		amendment file date 2016 JUN -6 AM 8: 53
	(no more than 90 days after t	amendment file date LVIO JUN 5
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutor artment of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of valicient for approval.	votes cast for the amendment(s)
	oved by the shareholders through voting grach voting group entitled to vote separate	
"The number of votes cast fo	or the amendment(s) was/were sufficient f	for approval
by		, , , , , , , , , , , , , , , , , , ,
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	sted by the board of directors without shar	reholder action and shareholder
The amendment(s) was/were adop action was not required.	ted by the incorporators without sharehole	lder action and shareholder
Dated 6	11/10 / Juin	
Signature	ector, president or other officer – if direct	tors or officers have not been
selected,	by an incorporator - if in the hands of a r	
appointe	d fiduciary by that fiduciary)	
	Victor Cucci	sia
_	(Typed or printed name of person	son signing)
	Officer/Direc	ctor
	(Title of person sign	gning)