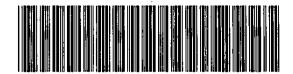
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(Requestor's Name)				
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2015 NOV -2 AM II: 27
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

Amend

NOV 4 2015 I ALBRITTON

COVER LETTER

TO:	Amendm	ient Sec	ction	•
	Division	of Cor	poratio	ns

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPOR	ATION: Lau 3	ffices a	f Hernandez & Associates
DOCUMENT NUMBI	ER: 110000	003712	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
-		Hernand Name of Contact Person	
Ĺ	an office	Firm/ Company	randez & Associates, P.A.
-	8990 Sw		
-	m: 9mi,	FL 3317.	3
	Shernand E-mail address: (to be us	Secula 2. Sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Ci Sell Name o	L Hernand f Contact Person	ez_at (<u>186</u> Area Co	
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)
	ing Address		Address Iment Section

Division of Corporations

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

to

Law offices of Hernand	
· · · · · · · · · · · · · · · · · · ·	tly filed with the Florida Dept. of State)
P10000003712	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Alu	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA SSEE F. S.
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent WA	
(Florida s	treet address)
New Registered Office Address:	(City), Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	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)

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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
l) Change	<u> </u>	Peter	Hernandez	8990 SU 86 Street
X Add				<u>miam. FL 33173</u>
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A ·
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)
W1A

The date of each amendment(s) date this document was signed.	adoption:		, if other than the
Effective date <u>if applicable</u> :	Oct. 30,	2015	
* * * * * * * * * * * * * * * * * * * *	(no more th	han 90 days after amendment	file date)
Note: If the date inserted in this document's effective date on the I			uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were a by the shareholders was/were		. The number of votes cast fo	r the amendment(s)
☐ The amendment(s) was/were a must be separately provided for			
	* *	s/were sufficient for approval	
by	(voting group)		**
	(voting group)		
☐ The amendment(s) was/were a action was not required.	dopted by the board of dire	ectors without shareholder act	ion and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators	s without shareholder action a	nd shareholder
Dated	130 115		
Signature	H	**	
(By a	director, president or other	r officer – if directors or offic	ers have not been
		f in the hands of a receiver, tru	istee, or other court
appo	inted fiduciary by that fiduc	ciary)	
	Gisell	e Hernand	er
	(Typed or pri	e Hernand inted name of person signing)	
	Preside	e 1t	
	("	Title of person signing)	