## P10000006946

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JUN 2 2 2022

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HAMMER NAVA	RRO & ASSOCIATES PA		
DOCUMENT NUM	BER: P10000006946			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	DEBORAH HAMMER			
		Name of Contact Person	1	
	HAMMER NAVARRO & ASSOCIATES PA			
		Firm/ Company		
	400 NW 74TH AVENUE			
		Address		
	PLANTATION, FL 33317			
		City/ State and Zip Code	e	
	DHAMMER@HHAACPA.C	COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
SAMUEL HAMMER		954 at (	370-6100	
Name of Contact Person		· · · · · · · · · · · · · · · · · · ·	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

HAMMER NAVARRO & ASSOCIATES PA

(Name of Corporati	on as currently filed with the F	lorida Dept. of State)	
P10000006946			
(Docum	nent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Co.	rporation adopts the follow	ring amendment(s)
A. If amending name, enter the new name of the co	orporation:		
HAMMER NAVARRO TANOLI & ASSOCIATES P	PA		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	" or "Co". A professional con		tion "Corp.,"
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u> )		20
	<del></del>	<u>~_</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	) <b>Y</b> )	: , .	-2
(Maning address MAT DE AT OST OFFICE BO		1. j. c	- P   11
		73.7	
		!	. O
D. If amending the registered agent and/or register	red office address in Flor <u>ida, er</u>	iter the name of the	
new registered agent and/or the new registered			
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zi	p Code)
New Registered Agent's Signature, if changing Reg	istored Acent		
I hereby accept the appointment as registered agent.	I am familiar with and accept the	e obligations of the position	<i>t</i> .
Sione	uture of New Registered Agent, if	Changing	_
·		e manie	
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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	ANEES TANOLI	3770 SPEAR POINT DRIVE
$\frac{X}{X}$ Add			ORLANDO, FL 32837
Remove			
2) X Change	SVP	SAMUEL HAMMER	400 NW 74th AVENUE
Add			PLANTATION, FL 33317
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Attach addition	adding additional Armal sheets, if necessary).	(Be specific)			
<del></del>					
	<del> </del>				
				<u> </u>	
				. <u></u> -	
<del></del>				<u> </u>	
•	<u> </u>				
If an amendme	nt provides for an exc	hange, reclassificati	on, or cancellation of	issued shares,	
provisions for (if not app	implementing the am licable, indicate N/A)	endment if not conta	ined in the amendmo	ent itself:	
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				<del></del>	

The date of each amendment(s) adop date this document was signed.	otion:	, if other than
<del>"</del>	28, 2022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	k does not meet the applicable statutory filing requirements, itment of State's records.	this date will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amend cient for approval.	dment(s)
	yed by the shareholders through voting groups. The following sch 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	· · · · · · · · · · · · · · · · · · ·	
selected, b appointed	tor, president or other officer – if directors or officers have not y an incorporator – if in the hands of a receiver, trustee, or othe fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
SV	'P	
	(Title of person signing)	

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