## P10000007488

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	LAKE BROWN W	'ILLIAMS CPA'S AND CO	DNSULTANTS, INC.
DOCUMENT NUME	BER: P10000007488		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	<del>-</del>
Please return all corres	pondence concerning this ma	tter to the following:	
	Janice A. Brown, CPA		
		Name of Contact Persor	1
	LAKE BROWN WILLIAMS	CPAs and CONSULTAN	TS, INC.
		Firm/ Company	······································
	71 South Dixie Highway, Sui		
		Address	·
	St. Augustine, FL 32084		
		City/ State and Zip Code	
	janice@lbwcpa.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JANICE A. BROWN	СРА	at ( 904	824-1521
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Indiment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment Articles of Incorporation

LAKE BROWN WILLIAMS CPA'S AND CONSULTANTS, INC.

☐ The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (e), F.S.

(Name of Corporation as currently filed with the Florida Dept. of State) P10000007488

(Document Number of Corporation (if known)

ment(s) to

LBW CPAs and Associates, Inc.			The n
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association."	Corp," "Inc," or "Co".	A professional corpo	porated" or the abbreviation "Corp.
B. Enter new principal office address, (Principal office address MUST BE A S	<u>if applicable:</u> TREET ADDRESS )	N/A	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	id/or registered office address N/A	idress in Florida, ente ss:	er the name of the
	(Florida	street address)	
New Registered Office Address:	N/A		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as registered.	hanging Registered Age tered agent. I am familio	nt: r with and accept the o	obligations of the position.
	Signature of New	Registered Agent, if co	hanging
Check if applicable			

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>şv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>N'ame</u>	<u>Addres</u> s
1) N/A Change	N/A	N/A	N/A
Add			
Remove			
2) Change			<del></del>
Add			<u> </u>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change		_	
Add			
Remove			

	cles, enter change(s) here:
Attach additional sheets, if necessary).	the speeding
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
/A	
• •	•
<del></del>	

The date of each amendment(s) a	doption:	, if other tha	n the
date this document was signed. N/A	·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
	(no more than 90 days after amendment file date)		
Note: If the date inserted in this is document's effective date on the D	plock does not meet the applicable statutory filing requirements, this date will n epartment of State's records.	ot <b>be listed</b> a	is the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and sh	areholder	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
"The number of votes case	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):  It for the amendment(s) was/were sufficient for approval	ALLAHASS	2022 HAY 21
by	(voting group)	KY Or	6
Dated		r STATE , FLORIDA	AM 7: 48
Signature(	Danie A. Britan		
selecte	lifector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court officers by that fiduciary)		
	Janice A. Brown		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)	<del></del>	