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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: NIESEN, PRICE.	WORTHY, CAMPO, P.A	۸.
	1BER: P10000010355		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	John D. Campo		
		Name of Contact Pers	on
	NIESEN, PRICE, WORTHY	, CAMPO, P.A.	
		Firm/ Company	
	5216 SW 91 Drive	· ·······	
		Address	-
	Gainesville, FL 32608		
		City/ State and Zip Co	de
	john@npw-law.com		
	E-mail address: (to be us	sed for future annual repo	rt notification)
	ion concerning this matter, pleas		373 0031
John D. Campo		at (373-9031
Nam	e of Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida De	partment of State;
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amer Divis The	et Address Indment Section It ion of Corporations Centre of Tallahassee IN. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

	Articles of Amendment	ida Dept. of State)
	Articles of Incorporation	502/APS 1/2 8 x
NIESEN, PRICE, WORTHY, CAMPO, P.A.	of	, 12, N
(Name of Corp	oration as currently filed with the Flor	ida Dept. of State)
P10000010355		79
(L	Document Number of Corporation (if kno	wn)
Pursuant to the provisions of section 607,1006, Fits Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:	
		Thenew
name must be distinguishable and contain the wo. "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corpo	porated" or the abbreviation "Corp.," oration name must contain the word
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	TE BOX)	
D. If amending the registered agent and/or renew registered agent and/or the new regist		r the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing	g Registered Agent:	
I hereby accept the appointment as registered ag		bligations of the position.

Signature of New Registered Agent, if changing

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CFO	PRICE, JEFFREY L	5216 SW 91 Drive
Add			Gainesville, FL 32608
XX Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itse	<u>snares.</u> If:
(if not applicable, indicate N/A)	<u></u>
	

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors wi action was not required.	thout shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes car by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appr	oval
by	."
(voting group)	_
April 26, 2021 Dated Signature	
(By a director, president or other officer – if directors or o selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	
John D. Campo	
(Typed or printed name of person signi	ng)
President	
(Title of person signing)	