# P10000020001

(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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'JAN = 9 2019' T. ROBERTS

#### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Joseph Gurian, P.A. DOCUMENT NUMBER: P10000020001 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joseph Gurian Name of Contact Person Firm/ Company 2525 Ponce de Leon Blvd, Suite 300 Address Coral Gables, FI 33134 City/ State and Zip Code jgurian@jgpalaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joseph Gurian Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & **\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

#### **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** tion

,	to
	Articles of Incorporat
	of
10 1 04	

### Joseph Gurian, P.A.

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

P10000020001

nt(s) to

A. If amending name, enter the new name of the corporation:		
Gurian Group, P.A.	The	
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	"Co". A professional corporation name must conta	
3. Enter new principal office address, if applicable:	2525 Ponce de Leon Boulevard	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 300	
	Coral Gables, FL 33134	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2525 Ponce de Leon Boulevard	
	Suite 300	
	Coral Gables, FL 33134	
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		
	eon Blvd, Suite 300	
Carol Cables	treet address)	
New Registered Office Address: COTAL GADIES (City	, Florida 33134 (Zip Code)	
(City	(Lip cone)	

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.

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>	Name	Address
1) Change		<del></del>	 
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add	· · · · · · · · · · · · · · · · · · ·		
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		 
Add			
Remove			

f amending or adding additional Arti	cies, enter change(s) here:
Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 01/01/2013				
Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
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.			
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):			
"The number of votes cast	t for the amendment(s) was/were sufficient for approval			
by	(voting group)			
	(voting group)			
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder			
<sub>Dated</sub> 12/17/	/2012			
Signature	director, president or other officer – if directors or officers have not been			
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)			
	Joseph Gurian			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			