## P10000038747

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

IAME OF CORPORATION: Law Office of Jennifer Sily, P.A.			
OCUMENT NUMBER: P10000038747			
The enclosed Articles of Amendment and fee are submitted for filing.			
lease return all correspondence concerning this matter to the following:			
Jennifer Sily Heslin			
Name of Contact Person			
Firm/ Company			
8726 NW 26 Street, Suite 26			
Address			
Doral, FL 33172			
City/ State and Zip Code			
jennifer.sily@gmail.com			
E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
ennifer Sily Heslin at (305 910-1904			
Name of Contact Person Area Code & Daytime Telephone Number			
nclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$35 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

Street Address

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

## Articles of Amendment to Articles of Incorporation of



Law Office of Jennifer Sily, P.A.

( <u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	70 72
P10000038747			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
Sily Heslin Law, P.A.			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the a "Co". A professional corporation name must "P.A."	bbreviation contain the
B. Enter new principal office address, if applicable:		8726 NW 26 Street, Suite 26	
	(Principal office address MUST BE A STREET ADDRESS)		<del>.</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8726 NW 26 Street, Suite 26	
		Doral. FL 33172	
D. If amending the registered agent ar new registered agent and/or the ne			
Name of New Registered Agent			
	8726 NW 26 Street, Suite 26		-
	(Florida s	treet address)	-
New Registered Office Address:	Doral	Florida 33172	
		(City) (Zip	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r 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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name .	<u>Addres</u> s
1) X Change	P	Jennifer Sily Heslin	8726 NW 26 Street, Suite 26
Add			Doral, FL 33172
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add		•	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	,
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amel (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) at date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date volument of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each 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	<u>.</u>	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
February 1, Dated Signature	2017	
(By/a di selected	rector, president or other officer – if directors or officers have not been hiby an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Jennifer Sily Heslin	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>