P100000 40833

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: The Law Office of	Amy Boggs, P.A.					
DOCUMENT NUN	P10000040833						
The enclosed Article	es of Amendment and fee are su	bmitted for filing.					
Please return all corr	respondence concerning this ma	tter to the following:					
	Rebecca Zahn						
		Name of Contact Person	1				
	Boggs Law Group, P.A.						
		Firm/ Company					
	4554 Central Ave. Suite L						
		Address					
	Saint Petersburg, FL 33711						
		City/ State and Zip Cod	e				
ופנים	nn@boggslawgroup.com						
		sed for future annual report	notitication)				
	is-man address, (to be a	sea for fatare annual report	normeanon)				
For further informat	ion concerning this matter, pleas	se call:					
Rebecca Zahn		at (
Name of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:				
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 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		Street Address Amendment Section Division of Corporations Clifton Building					
Ta	allahassee, FL 32314	2661 E	Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

The Law Office of Amy Boggs, P.A.

(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P10000040833	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	. this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>n:</u>
Boggs Law Group, P.A.	The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable:	19 TEB TE
(Mailing address MAY BE A POST OFFICE BOX)	N/A CIT 1
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of New Registered Agent N/A	
·	ida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
Signature of N	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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change			N/A	 _
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				· — —

E. If amending or add (Attach additional sh	ing additional Articles weets, if necessary). (B	, enter change(s) Se specific)	<u>here</u> :		
N/A	, y accessus y (1)	·· apregue)			
				_ 	
			_	<u></u>	
					
					-
			- <u></u>	·	
				-	
					
			. <u> </u>		
provisions for imp	rovides for an exchang lementing the amendn	<u>te, reclassification</u> nent if not contain	<u>, or cancellation (</u> led in the amendr	nent itself:	
(if not applical	ble, indicate N/A)	-			
N/A					
					-
			_		

The date of each amendment(s) adoption:	, if other than
date this document was signed. 1/24/2019	
Effective date if applicable:	
(no more than 9t) days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	nis date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendr by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st must be separately provided for 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	
hy" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	holder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	er
1/24/19	
Signature (By a director, president of other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe	
appointed fiduciary by that fiduciary)	
Amy D. Boggs	
(Typed or printed name of person signing)	
Principal	

the

the

(Title of person signing)