## P10000054485

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SECRETARY OF STATE

Amend 10 3/17/14

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Casesa-Bowden, P.A.				
DOCUMENT NUMBER: P10000054485				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jessie E. Bowden				
Name of Contact Person				
Casesa-Bowden, P.A.				
Firm/ Company				
3845 Fifth Avenue North				
St. Petersburg, FL 33713				
City/ State and Zip Code				
jeb@casesabowden.com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Jessie E. Bowden 323-4719				
Jessie E. Bowden  Name of Contact Person  Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
Enclosed is a circle for the following amount made payable to the Florida Department of State.				
■ \$35 Filing Fee				
(Additional copy is Certified Copy				
enclosed) (Additional Copy				
is enclosed)				
Mailing Address Amendment Section Amendment Section				

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Amendment Section

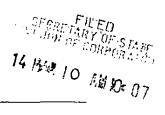
Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment 'to Articles of Incorporation



## Casesa-Bowden, P.A.

P10000054485	nt Number of Corporation (if k	nown)		-
	•	•		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporatioi	adopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corp	orporated" or the a coration name must	bbreviation contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	<u>if applicable:</u> TREET ADDRESS )			-
				-
				-
C. Enter new mailing address, if appli				
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u> )			-
				-
		<del></del>		-
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the i	name of the	
Name of New Registered Agent	Jessie E. Bowden			
	3845 Fifth Ave	nue North		
	(Florida street		<del></del>	
New Registered Office Address:	St. Petersburg	, Flor	<sub>ida</sub> 33713	-
	(City)		(Zip Code)	
New Registered Agent's Signature, if c				
I hereby accept the appointment as regist	ered agent. I am familiar wit	h and accept the obligat	ions of the position.	
	27/			
$C_{i_0}$	gnothre of New Registered Ag	ent, 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	Y	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	р	James N. Casesa	3845 Fifth Avenue North
Add			St. Petersburg, FL 33713
Remove			
2) Change	p	Jessie E. Bowden	3845 Fifth Avenue North
Add			St. Petersburg, FL 33713
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del> -	<del>-</del>	
Add			
Remove			
5) Change			
Add			
Remove			
<u>[                                    </u>			
6) L Change			<del>-</del>
Add			
Remove			

	(Be specific)			
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f an amendment provides for an excl	nange, reclassificati	on, or cancellatio	on of issued sha	ires,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassificati ndment if not conta	on, or cancellatio	n of issued sha dment itself:	ires,
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date this document was signed.	, ii other than th
Effective date if applicable: 12/19/2013	
(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/19/2013	
Signature Cinca Atacca	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
James N. Casesa	
(Typed or printed name of person signing)	
President	
(Title of person signing)	