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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ANDRIW J BELL, PA Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANDREW Bell Name of Person
ANDREW BELL PA Firm/Company
11451 KABROON CL, Address
TACKSONVILLE, FL 32246 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ANDREW Be // Name of Person at (904) 294-3739 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations NAME OF CORPORATION: ANDREW J. BELL P.A. DOCUMENT NUMBER: \$\(\) 10000059762 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANDREN Bell
Name of Contact Person ANDREW JAMES Bell, P.A.
Firm/Company ALKSONVILLE, FL 32246

City/ State and Zin Code * Q JAhoo, com to be used for future annual report notification) For further information concerning this matter, please call: ANDREW Bell at (904) 294-3739

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: ☐ \$43.75 Filing Fee & □\$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status \$ 25 ALREADY (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

FILED

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SECRETARY OF STATE
TALLAHASSEE: FLORIDA

ANDREW J. Bell P.	A.	MLLAHASSEE FIRE
(Name of Corporation as curren	tly filed with the Florida	a Dept. of State)
P1000059762		
	per of Corporation (if known	wn)
Pursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	Florida Statutes, this Fl	lorida Profit Corporation adopts the following
A. If amending name, enter the new name of t	the corporation:	
ANDREW JAMES BELL, P.	AL.	Th
ame must be distinguishable and contain th	e word "cornoration"	"company" or "incorporated" or the
abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe		
B. Enter new principal office address, if appli Principal office address MUST BE A STREET		
	-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	'E ROY)	
(mutting uturess MAT BE AT 031 OF TC.	<u> </u>	
		<u> </u>
		
D. If amending the registered agent and/or re		n Florida, enter the name of the
new registered agent and/or the new regist	ered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	address)
	•	,
-	(City)	, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing		
I hereby accept the appointment as registered ag	ent. I am familiar with a	and accept the obligations of the position.
<u></u>		
Sig	gnature of New Registered	d 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) **Title** Name Address Type of Action □ Add ☐ Remove ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendmen	t(s) adoption: 9/8/20/0
Effective date <u>if applicable</u> :	. (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder . ere adopted by the incorporators without shareholder action and shareholder
Dated	9/8/10
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
· ·	Andrew James BELL (Typed or printed name of person signing) Parcident
	(Title of person signing)