## P10000066773

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SECRETARY OF STATE
TALLAHASSEE, FLORID.



## COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORAT	Thomas J.	Crivello,	P.A.	
DOCUMENT NUMBER:				
The enclosed Articles of Art	mendment and fee are su	bmitted for fili	ing.	
Please return all correspond	lence concerning this ma	tter to the follo	wing:	
<u>Th</u>	omas Crivello			
		Name of Co	ontact Person	1
Th	omas J. Criveli	lo, P.A.		
<del></del>		Firm/ (	Company	
48	39 SW 148th A	ve STE	612	
<u></u>		Ad	dress	
Da	vie, FL 33330			
		City/ State a	and Zip Code	3
tommy	/crivello@gmai	l.com		
	E-mail address: (to be us		nnual report	notification)
For further information con	cerning this matter, pleas	e çalî:		
Thomas Crivello		at (	954	, 650-1766
Name of Contact Person			Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the l	Florida Depa	runent of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified (Additiona enclosed)	Сору	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division o P.O. Box	ent Scotion of Corporations		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xccutive Center Circle

## Articles of Amendment to Articles of Incorporation of

Triomas J. Crivello, P.A.			
(Name of Corporation as current	y filed with the Florida Dept.	of State)	•
P10000066773			
(Document Number	r of Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this <i>Florida Prof</i>	it Corporation adopts the following	ig amendment(s)
A. If amending name, cuter the new name of the	e corporation:		
<u> </u>			The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or	orp," "Inc," or "Co". A proj	ny," or "incorporated" or the a fessional corporation name must	bbreviation contain the
B. Enter new principal office address, if applica	ble:		_
Principal office address <u>MUST BE A STREET A</u>	DDRESS )		
	,		=
			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE.	ROY)		
(Maning days CS MAT BUATOST OF FICE.	DVA/		-
			-
	- · · · · · · · · · · · · · · · · · · ·		-
D. If amending the registered agent and/or registered new registered agent and/or the new register		la, enter the name of the	
Name of New Registered Agent		****	
	(Florida street address)	<del></del>	
New Registered Office Address:		, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		pt the obligations of the position.	
<del> </del>			
Signature of	New Registered Agent, if chan	ging	

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TALLAHASSEE, FLORIDA

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:

Properties 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 afficer/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	PT	John Doe		
X Remove	<u>v</u>	Mike Jones	•	
X Add	<u>\$Y</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add Remove				
2) Change Add Remove		<u> </u>		-
3 ) Change Add Remove		<del> </del>		
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove				

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)	
Article III should be the following;	
was a second policy and to	
he general purpose for which this corporation is organized is:	
o transact any and all lawful business for which corporations may be	
corporated under the Florida General Corporation Act.	
•	
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 amendment(s) a	loption: 05/01/2012
Effective date if applicable: 05	/01/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
☐ The amendment(s) was/were app must he separately provided for	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	or the amendment(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	oted by the incorporators without shareholder action and shareholder
Dated 05/01/	2012
Signature	W XXX
(By a d	cetor, president or other officer – if directors or officers have not been, by an incorporater – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
·	Thomas Crivello
	(Typed or printed name of person signing)
	President/Owner
	(Title of person signing)