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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Dinin Law Group,	P.A.	
	IBER: P10000103543		<u> </u>
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Max G. Soren, Esq.		
		Name of Contact Persor	1
	Soren Law Group, P.A.		
	· · ·	Firm/ Company	
	4200 NW 7th Avenue		
		Address	
	Miami, Florida 33127		
		City/ State and Zip Code	e
	admin@sorenlawgroup.com		
		sed for future annual report	notification)
For further informati Max G. Soren, Esq.	on concerning this matter, plea	se call: at (431-1333
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 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 Tallahassee, F1, 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

of

Dinin	Law	6 nous	P.	A.
$\mathcal{O}(m)$		July	/ .	.,.

	of Corporation as currently	v filed with the Florida Dept. o	f State)	
, , , , , , , , , , , , , , , , , , ,		Corporation (if known)		 ·
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this A	Florida Profit Corporation adop	its the following amen	dment(s)
A. If amending name, enter the new n	ame of the corporation:			
Soren Law Group, P.A.			The	
name must be distinguishable and contair "Inc.," or Co.," or the designation "C "chartered," "professional association,'	Corp." "Inc," or "Co". A	ompany," or "incorporated" or professional corporation nam	the abbreviation "Car	new rp.," vord
B. Enter new principal office address. (Principal office address MUST BE A S		4200 NW 7th Avenue, Miam	i, Florida 33127	_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) ad/or registered office addr	4200 NW 7th Avenue, Miam		7020 HAY
Name of New Registered Agent	Max G. Soren, Esq.			<u>₹</u>
	4200 NW 7th Avenue			*
	(Florida stre	ret address)		Ë
New Registered Office Address:	Miami		lorida	ب
	•	(City)	(Zip Code)	53
New Registered Agent's Signature, if call the second the appointment as regist the appointment as regist the appointment as regist the second the appointment as regist the second the appointment as regist the second the	ered agent. I am familiar w	ith and accept the obligations of	f the position.	
Check if annlicable		O 1131 117 7 1111131116		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	John Doe	
X Remove	<u>V</u>	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	PD	Max G. Soren	4200 NW 7th Avenue
X Add			Miami, Florida 33127
Remove			
2) X Change	D	Scott R. Dinin	4200 NW 7th Avenue
Add			Miami, Florida 33127
Remove 3) Change		-	
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change	 		
Add			-
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)	NA		
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If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassifica	tained in the ame	on of issued share: ndment itself:	<u>s,</u>
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The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.	5/4/2020	
Effective date if applicable:		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop action was not required.	ed by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for t icient for approval.	he amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ed	oved by the shareholders through voting groups. The fouch voting group entitled to vote separately on the ame	ollowing statement ndment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	<u>, , , , , , , , , , , , , , , , , , , </u>	
	(voting group)	
May 04, 2020 Dated		
selected,	ctor/president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, truste I fiduciary by that fiduciary)	have not been ee, or other court
λ	Iax G. Soren	
_	(Typed or printed name of person signing)	
þ	resident	
-	(Title of person signing)	