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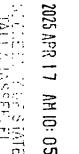
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Soren Law Group,	P.A.		
DOCUMENT NUM	1BER: P10000103543			
	es of Amendment and fee are su	bmitted for fili	ng.	
Please return all corr	respondence concerning this ma	ater to the follo	wing:	
	Max G. Soren, Esq.			
		Name of Co	ntact Persor	1
	Soren & Gallardo, PA			
		Firm/ C	Company	<del></del>
	1133 Normandy Drive			
	<del></del>	Ado	dress	
	Miami Beach, FL 33141			
		City/ State a	ınd Zip Code	2
	christin@sorenlawgroup.com	1		
	E-mail address: (to be us	sed for future a	nnual report	notification)
	on concerning this matter, pleas			
Christin Gallardo		at (	954 —————	_) 993-4460
Name	e of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the l	Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fill Certified C (Additional enclosed)	Гору	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.	ailing Address mendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment Articles of Incorporation of

FILED

2025 APR 17 AM 10: 05

Soren Law Group, PA

(Name of Corporation as currently filed with the Florida Dept. of State) P10000103543 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Soren & Gallardo, PA The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 1133 Normandy Drive B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Miami Beach, FL 33141 C. Enter new mailing address, if applicable: 1133 Normandy Drive (Mailing address MAY BE A POST OFFICE BOX) Miami Beach, FL 33141 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_. Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

Signature of New Registered Agent, if changing

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	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	$\underline{V}$	Mike Jo	ne <u>s</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add		_		
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add		_		
Remove				

E. <u>If ame</u> (Attach	nding or adding addition additional sheets, if neces	nal Articles, enter c ssarv). (Be specifi	hange(s) here:			
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. <u>Han a</u> provi	mendment provides for a sions for implementing t	an exchange, reclas he amendment if no	sification, or cance	ellation of issued shi amendment itself:	ares,	
(4	f not applicable, indicate	N/A)	, , , , , , , , , , , , , , , , , , ,			
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date this document was sig	nent(s) adoption:, if other than t
_	4/1/2025
Effective date <u>if applicabl</u>	le: (no more than 90 days after amendment file date)
	(no more man 90 days after amenament file date)
	in this block does not meet the applicable statutory filing requirements, this date will not be listed as on the Department of State's records.
Adoption of Amendment	(s) ( <u>CHECK ONE</u> )
■ The amendment(s) was/action was not required.	were adopted by the incorporators, or board of directors without shareholder action and shareholder
	/were adopted by the shareholders. The number of votes east for the amendment(s) s/were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval
h.,	
py	(voting group)
Ar	pril 1. 2025
Dated	
	9. A
Signature	(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)
	Max G. Soren
	(Typed or printed name of person signing)
	President
	(Title of person signing)