P110000004877

| (Re | equestor's Name) | | |
|-----------------------------------------|--------------------|------------------|--|
| (Ad | idress) | | |
| (Ad | Idress) | | |
| (Cit | ty/State/Zip/Phone | = #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | usiness Entity Nan | ne) | |
| (Do | ocument Number) | | |
| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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C. GOLDEN MAY 1 3 2019

COVER LETTER

TO: Amendment Section Division of Corporations

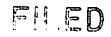
Tallahassee, FL 32314

| NAME OF CORPOR | RATION: The Law Office of | Amy H. Eichman, PA | |
|--------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| DOCUMENT NUMI | P11000004877 | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | spondence concerning this ma | atter to the following: | |
| | Amy Cohen | | |
| | | Name of Contact Perso | on |
| | | Firm/ Company | |
| | 11475 NW 75th Manor | | |
| | | Address | |
| | Parkland, Florida 33076 | | |
| | | City/ State and Zip Coo | de |
| amy@ | floridafertilitylaw.com | | |
| | E-mail address: (to be u | sed for future annual repor | t notification) |
| For further information | n concerning this matter, pleas | se call: | |
| Amy | | 954 at (| 980-2159 |
| Name of Contact Person | | | ode & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Dep | eartment of State: |
| S35 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 | | Street Address Amendment Section Division of Corporations Clifton Building | |

* Legal name change of attorney only

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



The Law Office of Amy H. Eichman, P.A

2019 MAY - 1 AH 10: 52

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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 Doc | | |
|-------------------------------|--------------|---------------|--------------|---------------------------------|
| X Remove | <u>V</u> | Mike Jon | <u>es</u> | |
| X Add | <u>sv</u> | Sally Smi | <u>ith</u> | |
| Type of Action (Check One) | <u>Title</u> |] | <u>Name</u> | <u>Addres</u> s |
| 1) X Change | D | · | Amy H. Cohen | 11555 Heron Bay Blvd, Suite 200 |
| Add | | | | Coral Springs, Florida 33076 |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | - | | |
| Add | | | | <u></u> |
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| f an amendment provides for an excl | nange, reclassification | on, or cancellation o | fissued shares, | |
| provisions for implementing the ame | nange, reclassification endment if not conta | on, or cancellation of ined in the amendm | f issued shares, ent itself: | |
| f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification adment if not conta | on, or cancellation o ined in the amendm | f issued shares, ent itself: | |
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| The date of each amendment(s) adoption: | , if other than the |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| date this document was signed. | |
| Effective date if applicable: (no more than 90 days after amenda | |
| (no more than 90 days after amendi | ment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records. | g requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ■ The amendment(s) was/were adopted by the shareholders. The number of votes car by the shareholders was/were sufficient for approval. | ast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on t | |
| "The number of votes cast for the amendment(s) was/were sufficient for appr | roval |
| by | 97 |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required. | r action and shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required. | ion and shareholder |
| DatedSignature | |
| (By a director, president of other officer - if directors or selected, by an incorporator - if in the hands of a receive | |
| appointed fiduciary by that fiduciary) | i, trustee, or other court |
| Amy Cone | γ |
| (Typed or printed name of person sign | ing) |
| Director | |
| (Title of person signing) | |