P11000054701

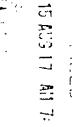
(Re	equestor's Name)			
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(Do	ocument Number))		
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T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SENADA ADZEM	M BERNARD PA		
DOCUMENT NUME	P11000054701			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	SENADA ADZEM			
		Name of Contact Person	1	
		Firm/ Company		
	32 SE 2ND AVE #416			
	DELRAY BEACH, FL 3344	Address 4		
		City/ State and Zip Code	e	
SENA	ADA.ADZEM@GMAIL.COM	М		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
SENADA ADZEM		at (913-6680	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	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, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SENADA ADZEM BERNARD PA

SERVEY ADELIA DERIVADA	
	filed with the Florida Dept. of State)
P11000054701	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Faits Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
SENADA ADZEM PA	T.
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addre new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida City) (Zip Code)
,,	(24) 2000)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
Signature of New Req	egistered 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)

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 D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	-	_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ttach additional sheets, if necessary).	(Be specific)				
					_
<u> </u>					_
		- <u>-</u>			
		· <u></u> _			
					_
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		_			
				<u>-</u>	
an amendment provides for an exch	ange, reclassificati	on, or cancellati	on of issued sha	ares.	
rovisions for implementing the amer (if not applicable, indicate N/A)	adment if not cont	nined in the ame	ndment itself:		
(t) not applicable, matcute (VA)					
				 	_
				<u> </u>	_
		<u> </u>			
					_

	8/11/15	
The date of each amendment(s) a late this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
meetite date it applicative.	(no more than 90 days after amendment file date	2)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement epartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amufficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and share	eholder
Dated	8/12/2015	
Signature	- Culia V.	
(By a select	director, president or other officer – if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or	
appoi	nted fiduciary by that fiduciary)	
	SENADA ADZEM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	