P11000083507

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APPROYED AND FILED

C. LEWIS

OCT 17 2013

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: HOLLY R. G BER: P1100008350		P.A	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	DAVID W. GRIFF	IN		
		Name of Contact Person	l	
	DAVID W. GRIFF	IN, P.A.		
		Firm/ Сотралу		
	565 S. DUNCAN	AVE.		
		Address		
	CLEARWATER,	FL 33756		
		City/ State and Zip Code		
НС	NEST.LAWYER@	DAVIDWGRIF	IN.NET	
		ed for future annual report		
For further informatio	n concerning this matter, pleas	ee call:		
DAVID W. G	RIFFIN	_{at (} 727	, 466-6900	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	ertment 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)	
	iling Address	_	Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

APPROVED AND FILED

Articles of Amendment Articles of Incorporation

13 OCT -9 PM 1:22 SECRETARY OF STATE TALLAHASSEE: FLORIDA

HOLLY R. JOHANTGEN, P.A.

	,		
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	
P11000083507			
(Document	Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation adop	ts the following amendment(s) to
A. If amending name, enter the new nar	ne of the corporation:		
HOLLY JOHANTGEN-BF	ROWN, P.A.		. The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc." or "Co	". A professional corporation	ted" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		36 SCHOOL STF	REET
		BATH, ME 04530	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		36 SCHOOL STR	EET
(//dim/g mm/cos (<u>////_ // // // // // // // // // // // /</u>	<u> </u>	BATH, ME 04530	
D. If amending the registered agent and		s in Florida, enter the name	of the
new registered agent and/or the new registered office addres Name of New Registered Agent DAVID W. GRIF		IN	
	565 S. DUNCAN	AVE.	
	(Florida street		
New Registered Office Address:	CLEARWATER	, Florida_33	3756
· carretain of the state of the	(City)		(Zip Code)
Now Desistand Agentle Signature if sh	anging Degistered Agents		
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		h and accept the obligations o	f the position.
Dau	is W. Ging	Lin	
Sign	nature of New Registered Ag	on, 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 <math>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 Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>me</u>		<u>Addres</u> s
1) Change	MRS	_ <u>H</u>	OLLY R. JOHANTGEN, D	gm	28467 US 19 NORTH,#302
Add					CLEARWATER, FL 33761
Remove					
2) Change	PSD	<u>H</u>	OLLY JOHANTGEN-BRO	νN	36 SCHOOL STREET
Add					BATH, ME 04530
Remove					
3) Change				-	
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		-			
Add					
Remove					

E. <u>If amend</u> (Attach o	<mark>ding or adding ac</mark> additional sheets, i	lditional Article	s, enter change Be specific)	e(s) here:			
N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, (ac specific)				
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provisi	nendment provide ions for implement not applicable, ind	iting the amend	ge, reclassifica ment if not con	tion, or cancell tained in the ar	ation of issued s nendment itself	hares. :	
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SECRETARY OF STATE than the The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated OCTOBER 2, 2013 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) **HOLLY JOHANTGEN-BROWN** (Typed or printed name of person signing) PRESIDENT

(Title of person signing)