P120000002248

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



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01/31/12--01013--001 **35.00

SECRETARY OF STATE

Amend + N/c

FEB - 9 2012 T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: Barbac | M Shapiro PA | | | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBER: P 120000 | 02248 | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Barbana | Shapiro Name of Contact Person | | | | |
| Firm/ Company | | | | | |
| 661 E La | Address Address FC 33324 City/ State and Zip Code | | | | |
| 0.1 | Address | | | | |
| - Planteti | on FC 33324 | | | | |
| City/ State and Zip Code | | | | | |
| E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: | | | | | |
| Barbara Shapiro | at (954) 558 7200 Area Code & Daytime Telephone Number | | | | |
| Name of Contact Person | Area Code & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount made | payable to the Florida Department of State: | | | | |
| S35 Filing Fee | □S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) | | | | |
| Mailing Address | Street Address | | | | |
| Amendment Section Amendment Section Division of Corporations Division of Corporations | | | | | |
| P.O. Box 6327 | Clifton Building | | | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle Tallahassee. FL 32301 | | | | |



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 1, 2012

BARBARA SHAPIRO 61 E LAKE DASHA LANE PLANTATION, FL 33324

SUBJECT: BARBARA M SHAPIRO INC

Ref. Number: P12000002248

We have received your document for BARBARA M SHAPIRO INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 812A00003581

Articles of Amendment to

Articles of Incorporation of

BARBARA M SHAPIRO INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000002248

(Document Number of Corporation (if known)

TALLAHASSEE. FLORIDA Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

| must be distinguishable and contain the word "corpo."," "Inc.," or Co.," or the designation "Corp.," "Inc." "chartered," "professional association," or the abbreviat | or "Co". A professional corporation name must |
|---|---|
| nter new principal office address, if applicable: cipal office address <u>MUST BE A STREET ADDRESS</u>) | <i>N/A</i> |
| nter new mailing address, if applicable: ailing address <u>MAY BE A POST OFFICE BOX</u>) | |
| amending the registered agent and/or registered office w registered agent and/or the new registered office add | address in Florida, enter the name of the |
| Name of New Registered Agent | 11/19 |
| (Floria | la street address) |
| | City) Florida (Zip Code) |

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 Job | nn Doe | |
|-------------------------------|--|---------------------------------------|-----------------|
| X Remove | <u>V</u> <u>Mi</u> | ke Jones | |
| X Add | <u>SV</u> <u>Sa</u> | lly Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change Add Remove | | <u> </u> | |
| 2) Change Add Remove | | | |
| 3) Change Add Remove | | | |
| 4) Change Add Remove | ************************************** | | |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | · · · · · · · · · · · · · · · · · · · | |

| 1f amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | |
|---|-------------------|
| | _ |
| , | _ |
| ANTICK III THE PUNPONE FOR WHICH THIS COMPORATION IS IS REALTOR | -OngaNiza |
| 15 REALTOR | - |
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| | |
| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | |
| (if not applicable, indicate N/A) | |
| | - |
| | - |
| | - |
| | |
| | • |
| | |

| The date of each amendment(s) adoption: 1 25(2012 |
|--|
| Effective, date if applicable: 1/25/2012 |
| (no more than 90 days after amendment file date) |
| CURCU OVE |
| 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 |
| by" (voting group) |
| (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 1/25/2012 |
| Signature Larbara & Shapin |
| (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) |
| Borbara M. Shapiro (Typed or printed name of person signing) |
| (Typed or printed name of person signing) |
| President |
| (Title of person signing) |