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COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPORATION:	Æ OF ENRIQUE BARQUINEI	RO, P.A.		
P12000005328 OCUMENT NUMBER:				
he enclosed Articles of Amendment and fee a	are submitted for filing.			
lease return all correspondence concerning thi	is matter to the following:			
ALFREDO MERCADO	O			
PRIME TAX SOLUTION	Name of Contact Perso ONS LLC	n		
1478 RIVERPLACE B	Firm/ Company ELVD #1803			
JACKSONVILLE, FL	Address 32207			
	City/ State and Zip Coc	le		
FREDO@PRIMETAXJAX.0	OM			
E-mail address: (to	be used for future annual report	t notification)		
or further information concerning this matter,	please call:			
ALFREDO MERCADO	904 at (729-0372		
Name of Contact Person		Area Code & Daytime Telephone Number		
nclosed is a check for the following amount n	nade payable to the Florida Dep	artment of State:		
¶\$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat		☐\$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	Ameno Divisio Cliftor	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LAW OFFICE OF ENRIQUE BARQUINERO, P.A.

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE, FL 32207	P12000005328 (Name of Corporation as curr	rently filed with the Florida Dept, of State)
A. If amending name, enter the new name of the corporation: BARQUINERO LAW 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 association, or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) (City) (City) New Registered Agent as registered agent. I am familiar with and accept the obligations of the position. The new name must contain the word "corporation." "company." or "incorporated" or the abbreviation "P.A." 1035 LASSALE ST [JACKSONVILLE, FL 32207] [JACKSONVI	(Document Numb	per of Corporation (if known)
BARQUINERO LAW. P.A. 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS.) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address (City) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: (Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		this Florida Profit Corporation adopts the following amendment(s) to
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "bre.," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tain familiar with and accept the obligations of the position.		
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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.	New Regimerea Office Address.	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		man i and an
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		· · · · ·
Signature of New Property of the State of th		
Signature of isem Regimerea Agent, if changing	Signature of No	lew Registered 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 Doc 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 Doc, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>ec</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				 _
Remove				
4) Change				
Add		_		
Remove				
5) (1				
5) Change		_		
Add				·
Remove				
6) Change				
Add				
Remove				

E. <u>If amending or</u> (Attach <i>additiona</i> N/A	adding additional Ar al sheets, if necessary).	ticles, enter chan . (Be specific)	ge(s) here:			
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F. <u>If an amendme</u>	nt provides for an exc	change, reclassifi	cation, or cancel	lation of issued sha	ares,	
provisions for	implementing the am licable, indicate N/A)	endment if not co	ontained in the a	mendment itself:		
N/A	ncame, maicine (V/A)					
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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 amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, t document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following so 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	cholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required. 08/30/2019	ler
Dated	
Circums 4	
Signature (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary) ENRIQUE BARQUINERO	
(Typed or printed name of person signing) PRESIDENT	
(Title of person signing)	