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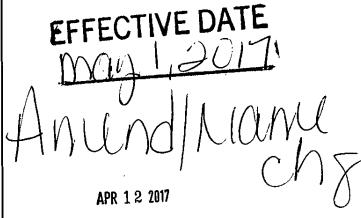
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Law Offices of Veronica Tejada Lacayo, P.A. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Veronica Tejada Lacayo Name of Contact Person Tejada Lacayo, P.A. Firm/ Company 8950 SW 74th Ct., Suite 2223 Address Miami, FL 33156 City/ State and Zip Code veronica@lacayolegal.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 767-2977

Area Code & Daytime Telephone Number Veronica Tejada Lacayo Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassec, FL 32301

EFFECTIVE DATE Articles of Amendment

Law Offices of Veronica Tejada

VE DATE Articles of Amendment to Articles of Incorporation of	ALCON AND SO
Lacayo, P.A.	TABLE TO THE
(Name of Corporation as currently filed with the Florida Dept. of	State)
(Dogument Number of Cornection (if Impum)	4

nt(s) to

P12000006698	(05)	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	s Florida Profit Corporation adopts the following amend	
A. If amending name, enter the new name of the corporation:		
Tejada Lacayo, P.A.	The n	
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviati "Co". A professional corporation name must contain i	
B. Enter new principal office address, if applicable:	8950 SW 74th Ct., Suite 2223	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami, Florida 33156	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8950 SW 74th Ct., Suite 2223	
	Miami, FL 33156	
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addre	dress in Florida, enter the name of the ss:	
of the state of th		
(Florida s	treet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
	, Florida, Florida	
Signature of New	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 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
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5) Change			
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6) Change			
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	(Be specific)
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If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	, if other than the
May 1, 2017	
Effective data 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 requiremen document's effective date on the Department of State's records.	ts, 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 cast for the amendment(s) was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	ng statement nt(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 s action was not required.	hareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	holder
Dated Control 5, 2017 Signature Dionicularia	
Signature Lownice Vice Vice Vice	
(By addirector, president or officer – if directors or officers have	not been
selected, by an incorporator - if in the hands of a receiver, trustee, or or	other court
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	