## P12000010395

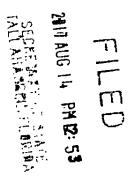
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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Amend

AUG 18 2017 I ALBRITTON

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: JAY THAKKAR.	P.A.		
DOCUMENT NUMB	ER: P12000010395			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
,	JAY THAKKAR			
-		Name of Contact Person	1	_
-		Firm/ Company	<del></del>	_
	10692 LANGEFIELD STRE	ET		
-	ORLANDO, FL	Address	ĭ	_
-	OREANDO, 1 mp 2032	City/ State and Zip Code		_
		Cityr State and Zip Cod	•	
	CFGLAWOFFICE.COM			
ķ	E-mail address; (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
JAY R. THAKKAR		at ( <u>407</u>	733-1601	
Name o	f Contact Person	Area Co	de & Daytime Telephone Numb	ег
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
S35 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)	
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assec, FL 32301	

	Articles of Amenament
•	to
	Articles of Incorporation
	of

Articles of I	Amendment to Incorporation of
JAY THAKKAR, P.A.	
	ntly filed with the Florida Dept. of State)
P12000010395	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: N/A	
name must be distinguishable and contain the word "corporate	tion " "company" or "incorporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	10692 LANGEFIELD STREET
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	ORLANDO, FL 32832
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10692 LANGEFIELD STREET
	ORLANDO, FL 32832
D. If amending the registered agent and/or registered office adney registered agent and/or the new registered office addresses.	
IAV THAKKAR	<del></del>
Name of New Registered Agent 10692 LANGEFIELD S	STREET
	street address)
Name Province of Office Address: ORLANDO	. Florida 32832
New Registered Office Address:	(City) (Zip Code)
	(City) (Zip Coae)
New Registered Agent's Signature, if changing Registered Age	
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
	r with and accept the obligations of the position.

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	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>Name</u>	<u>Addres</u> s
1) Change		<u>N/A</u>	N/A
Add			
Remove			<del></del>
2) Change		N/A	N/A
Add			
Remove			
3 ) Change		N/A	N/A
Add			
Remove			
4) Change		N/A	N/A
Add			
Remove			
5) Change		N/A	N/A
Add			
Remove			
δ) Change		N/A	<u>N/A</u>
Add			
Remove			

If amending or adding additional Art	icles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
A	
<del></del>	
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	<u>, , , , , , , , , , , , , , , , , , , </u>
•	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
A	

The date of each amendment(s) adoption:,,	, if other than the
Effective date if applicable:	
(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
■ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Signature  By a director, president or other officer – selected by an incorporator – if in the hal appointed fiduciary by that fiduciary)	
JAY THAKKAR	
	of agent distinct
(Typed or printed name	e of person signing)
PRESIDENT	
(Title of pe	rson signing)