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S TALLENT JUL 02 2019 SECUL TARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:Threlkeld & Ce	trangelo, P.A.			
DOCUMENT NUM	D12000015052				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Joel A. Threlkeld, Esq.				
		Name of Contact Person			
	Threfkeld & Cetrangelo, P.A.				
		Firm/ Company			
	3003 Tamiami Trail North, S	uite 200			
		Address			
	Naples, FL 34103				
		City/ State and Zip Code			
	S 1 .1 . 1				
Joeig	gnapleslegal.net	sed for future annual report	<u> </u>		
For further informatio	on concerning this matter, pleas		234 - 5034		
	. S. C D	at (239	_) 254 - 5054 le & Daytime Telephone Number		
Name	of Contact Person	Area Coc	ie & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			<u>Address</u>		
	endment Section		ment Section		
	ision of Corporations . Box 6327		n of Corporations Building		
	lahassee, FL 32314		xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Threlkeld & Cetrangelo, P.A.

(Name of Corporation as curren	ntly filed with the Florid	a Dept. of State)
P120	00015952	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is <i>Florida Profit Corpora</i>	tion adopts the following amendment(
A. If amending name, enter the new name of the corporation:		
Threlkeld Law, P.A.		✓The new
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	"Co". A professional c	ncorporated" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	20
(Principal office address MUST BE A STREET ADDRESS)		
		9 9
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		1.703 <u>二</u> "你说
		\frac{\tau_1}{\tau_1} \frac{\tau_1}{\tau_1}
12. 15	Iduania Chadda antari	h.,
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.		ne name of the
N/A Name of New Registered Agent		
Name of New Registered Agent	<u> </u>	
(Florida	street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
		,
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		Continue of the position
т негелу иссері іне арранішені из гедімегей адені. Тат затиш	и жан ини иссерстве от	gaitims by the position.
		
Signature of New	v Registered Agent, if char	nging

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each a 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. The 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 Cha Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:		Labor Don	
X Change	<u> 14</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	Anthony J. Cetrangelo, Jr.	3003 Tamiami Tr. N., Stc. 200
Add			Naples, FL 34103
X Remove			
2) Change			
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. It amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. 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)
N/A

, -

The date of each amendment(s) adoption:	, if other t
date this document was signed.	If other t
N/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of S	of meet the applicable statutory filing requirements, this date will not be listed State's records.
Adoption of Amendment(s) (CH	ECK ONE)
■ The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	chareholders. The number of votes cast for the amendment(s) pproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for approval
by	······································
	ing group)
☐ The amendment(s) was/were adopted by the taction was not required.	poard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the i action was not required.	ncorporators without shareholder action and shareholder
06-18-2019 Dated	
Signature	June
	dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
Joel A. Thre	lkeld
	Typed or printed name of person signing)
President	
	(Title of person signing)