## P12000046780

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T. LEW

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION:	L. Baker	
DOCUMENT NUMBER: P120	000 46780	)
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Vicky	Name of Contact Person	Esquire
	Firm/ Company	<del></del>
2398 EV	min Stree	<i>ε</i> <del>λ</del>
	Address	
11/10		570
	City/ State and Zip Code	•
E-mail address: (to the us	Yahoo, Com sedifor future annual report	notification)
For further information concerning this matter, please	se call:	
Vicley Baker	at ( \$50	313-1484
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		
	Amendment Section Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

FILED

to Articles of Incorporation

12 MAY 24 AM 8: 58

SEBRETPHY HE STATE TALLAHASSEE FLORIDA

Vicky 1 Raxor P.A.

(Name of Corporation as currently filed with the Flor	ida Dept. of State)
P12000046780	
(Document Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Colemn & Raker, P.A.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA-Same
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A-Same
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent  Name of New Registered Agent	in Florida, enter the name of the
New Registered Office Address: (Florida street) (City)	, Florida(Zip Code)
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.

Page 1 of 4

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> <u>Johr</u>	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	5	Laura S. Coleman	5228 Elmina St milton, 17232570
2) Change Add Remove		Vicky L. Baker	5228 Elmina St. Mi Hon 102 32570
3 ) Change Add Remove	· ·		
4) Change Add Remove			
5) Change Add Remove			
6) Changè Add Remove	<del></del> :		

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)	
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NIA	
NIA	

The date of each amendment(s) adoption: May 22, 20, 20, 2
Effective date if applicable:  (no more than 90 days after amendment file date)
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
☐ 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 5/23/12
Signature  (By a director, presidence 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)
(Typed or printed name of person signing)
President (Title of person signing)