## P1300000 4404

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SECRETARY OF STATE ALLAHASSEE, FLORID,

APPROVED AND FILED

C. LEWIS
NOV 1 2013
EXAMINER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: GOLD BAR LAW GROUP, P.A.					
DOCUMENT NUMBER: P1300000440	)4				
The enclosed Articles of Amendment and fee are su					
Please return all correspondence concerning this ma	tter to the following:				
ROBERT GITMEID					
<del></del>	Name of Contact Person				
	Firm/ Company				
17201 COLLINS AVE, APT 3602					
SI ININV I	Address SUNNY ISLES BEACH FL 33160				
30(4(4) )	City/ State and Zip Code				
rgitm	neid@gmail.com				
	sed for future annual report notification)				
For further information concerning this matter, pleas	se call:				
	at ()				
Name of Contact Person	at ()				
Enclosed is a check for the following amount made	payable to the Florida Department of State:				
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

APPROVED AND FILED 13 OCT 28 PM 2: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA

## Articles of Amendment to Articles of Incorporation of

## GOLD BAR LAW GROUP, P.A.

(Name of Corporation as currently filed with the Flor	ida Dept. of State)
P13000004404	
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
ATLANTIC LAW GROUP, P.A.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	a de con
· ·	
New Registered Office Address: (City)	, Florida
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit	h 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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Saily Sr	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
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3) Change				
Add				
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4) Change		_		
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Remove				
5) Change		<del></del>		
Add				
Remove				
6) Change				
Add				
Remove				

ach additional sheets, if necessary)	. (Be specific)		
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n amendment provides for an ex ovisions for implementing the ar	change, reclassificati	on, or cancellation	or issued snares,
(if not applicable, indicate N/A)	ienament ii not cont	tinea in the amena	Hent Hoen.
(9 пострупольно, польше пост,			
		,	

APPROVER AND FILED

The date of each amendment(s) ad	option: October 16, 2013	13 OCT 28	OF STATE E. FLORIDA
date this document was signed.		SECRETA	-1.11.5i.32
Effective date if applicable:		TALLAHASSE	OFSTATE
Enective date if applicable:	(no more than 90 days after amend	ment file date)	E. FLORIDA
		,	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopty the shareholders was/were suf	pted by the shareholders. The number of votes ca ficient for approval.	ast for the amendment(s)	
	roved by the shareholders through voting groups. each voting group entitled to vote separately on		
	for the amendment(s) was/were sufficient for app	roval	
by	(voting group)		
	(voting group)		
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholde	r action and shareholder	,
The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder act	ion and shareholder	
DatedO	8/13 Q. Stus		
	rector, president or other officer - if directors or		_
	<ul> <li>by an incorporator – if in the hands of a receive ed fiduciary by that fiduciary)</li> </ul>	r, trustee, or other court	
арроппе	rd (iductary by that ilductary)		
	Robert Gitmeid		
-	(Typed or printed name of pers	on signing)	_
	President		
_	(Title of person signing	3)	_