

PI3000022194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

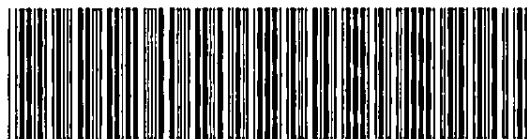
(Business Entity Name)

(Document Number)

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FILED  
2021 JUN -2 PM 3:35  
KANSAS SEC. FILE

Amend  
Name chg

JUN 11 2021

ALBRITTON

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: ANA SCHMELZ PA

DOCUMENT NUMBER: P13000022194

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANA L. MINES  
Name of Contact Person  
ANA SCHMELZ PA  
Firm/ Company  
4269 HEARTHSTONE DRIVE  
Address  
SARASOTA, FL. 34238  
City/ State and Zip Code  
ANALMINES@FLORIDA.PA.HON.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA L. MINES at ( 305 ) 766-0615  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 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)

Mailing Address

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



RECEIVED

2021 JUN -3 PM 12:05

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

May 20, 2021

ANA L. MINES  
4269 HEARSTONE DRIVE  
SARASOTA, FL 34238

SUBJECT: ANA SCHMELZ, PA  
Ref. Number: P13000022194

We have received your document for ANA SCHMELZ, PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

The attached form must be completed in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 621A00010806

Articles of Amendment  
to  
Articles of Incorporation  
of

ANA SCHMELZ PA  
(Name of Corporation as currently filed with the Florida Dept. of State)

P13000022194  
(Document Number of Corporation (if known))

FILED  
2021 JUN -2 PM 3:35  
CLERK OF THE CIRCUIT COURT  
IN AND FOR THE COUNTY OF SARASOTA, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

ANA L. MINES PA  
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

4269 HEARTHSTONE DRIVE  
SARASOTA, FL. 34238

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

SAME ABOVE

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

ANA L. MINES  
4269 HEARTHSTONE DRIVE  
(Florida street address)

New Registered Office Address:

SARASOTA, Florida FL. 34238  
(City) (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.

Ana L. Mines  
Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>D</u>	<u>ANA SCHMELE</u>	<u>4269 HEARTSTONE</u>
<input checked="" type="checkbox"/> Add		<u>ANA L. MINES</u>	<u>SARASOTA</u>
<input type="checkbox"/> Remove			<u>FL.</u>
2) <input type="checkbox"/> Change			<u>34238</u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

PLEASE CHANGE ANA SCHMELE PA  
TO: ANA L. MINES PA  
SAME ADDRESS ABOVE

E. If 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: \_\_\_\_\_  
date this document was signed.

3/9/21

, if other than the

Effective date 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 requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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 \_\_\_\_\_  
(voting group)

Dated \_\_\_\_\_

Signature \_\_\_\_\_

(By a director, president or other officer - if directors or officers have been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ANA SCHMELZ  
(Typed or printed name of person signing)

Director  
(Title of person signing)