P13000042675

(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: <u>CPA Financial and Tax Services</u> , INC DOCUMENT NUMBER: <u>P13000</u> 42675
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kimbaly Temple Name of Contact Person CPA Financial and Tax Services, INC. Firm/ Company Aloo 45th Street # B13 Address WtSt Palm Beach, Fl. 33407 City/ State and Zip Code
thewisonfamily D324 e gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kimberly Temple at 501, 291-1200 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:
Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



June 3, 2014

KIMBERLY TEMPLE CPA FINANCIAL AND TAX SERVICES, INC. 2100 45TH STREET #B13 WEST PALM BEACH, FL 33407

SUBJECT: CPA FINANCIAL AND TAX SERVICES, INC

Ref. Number: P13000042675

We have received your document for CPA FINANCIAL AND TAX SERVICES, INC 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The date of adoption of each amendment must be included in 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.

Diane Cushing Senior Section Administrator

Letter Number: 614A00011942

RECEIVED 14 JUN26 PHI2: 35

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2014

KIMBERLY TEMPLE CPA FINANCIAL AND TAX SERVICES, INC. 2100 45TH STREET #B13 WEST PALM BEACH, FL 33407

SUBJECT: CPA FINANCIAL AND TAX SERVICES, INC

Ref. Number: P13000042675

We have received your document for CPA FINANCIAL AND TAX SERVICES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The date of adoption of each amendment must be included in 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.

Diane Cushing Senior Section Administrator

Letter Number: 314A00014337

Articles of Amendment to Articles of Incorporation

CPA Financial and Tax Services, INC (Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

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

ne must be distinguishable and contain the	y word "corporation" "company"	" or "incornor	The
orp.," "Inc.," or Co.," or the designation "	Corp," "Inc," or "Co". A profess	sional corporat	ion name must contain
d "chartered," "professional association," o			
Enter new principal office address, if appli	cable		
incipal office address <u>MUST BE A STREET</u>	ADDRESS)		· · · · · · · · · · · · · · · · · · ·
	 -		
Enter new mailing address, if applicable:	E DOV		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u> </u>	· ·	
			
			
If amending the registered agent and/or re		enter the nam	e of the
If amending the registered agent and/or re new registered agent and/or the new regist		enter the nam	e of the
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new registered agent and/or the new regist Name of New Registered Agent	tered office address: (Florida street address)		
new registered agent and/or the new regist Name of New Registered Agent	tered office address: (Florida street address)		
new registered agent and/or the new regist Name of New Registered Agent	(Florida street address) (City) g Registered Agent:	, Florida_	(Zip Code)

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address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice P Executive Officer; CFO = held. President, Treasurer Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove,	and/or D if necess rector titl President Chief I r, Directo in the for	irector be ary) e by the fir ; T= Treas Financial Cor would be llowing ma orporation	ing added: st letter of the office title: surer; S= Secretary; D= Director; TR Officer. If an officer/director holds mo e PTD. inner. Currently John Doe is listed as a Sally Smith is named the V and S. The	eer/director being removed and title, name, and = Trustee; C = Chairman or Clerk; CEO = Chief re than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is ese should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe	:	
X Remove	<u>v</u>	Mike Jon	<u>es</u>	
_X Add	<u>sv</u>	Sally Sm	i <u>th</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
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2) Change				
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5) Change		<u> </u>		<u>.</u>
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Remove				

Change

Add

_ Remove

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
lf 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)	

The date of each amendment(s) adoption:	(5),201T	_, if other than the
date this document was signed.		
Effective date if applicable: (no more	e than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ON	<u>E</u>)	
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the sharehold must be separately provided for each voting group ent		
"The number of votes cast for the amendment(s)	was/were sufficient for approval	
hy(voting group,	,,	
The amendment(s) was/were adopted by the board of d action was not required.	irectors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporate action was not required.	ors without shareholder action and shareholder	
Dated		
Signature Mus. U.A.		
(By a director, president or ot	her officer – if directors or officers have not been - if in the hands of a receiver, trustee, or other court duciary)	
<u>Pierre</u>	Wilson	_
(Ту	ped or printed name of person signing)	cas mak
Dwner	(Title of person signing)	西巴丁
·	(Title of person signing)	
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