P13000 060 676

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900332899699

08/08/19--01018--012 **35.00

2019.11 1-3 PH 1: 23

Amend

AUS 1 3 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: EXCEPTIONAL S	SPEECH THERAPY, INC						
	BER: P13000060876							
The enclosed Articles	of Amendment and fee are su	bmitted for filing.						
Please return all corre	espondence concerning this ma	tter to the following:						
	JENNIFER R. OSORIO							
	Name of Contact Person							
	EXCEPTIONAL SPEECH THERAPY, INC							
	Firm/ Company							
	10200 NW 25 STREET #A 108							
	Address							
	DORAL, FL 33172							
	City/ State and Zip Code							
	E-mail address: (to be us	sed for future annual report	notification)					
For further informatic	on concerning this matter, pleas	se call:						
JENNIFER R. OSORIO		at (305	733-3405					
Name	of Contact Person	Area Co	at (305) 733-3405 Area Code & Daytime Telephone Number					
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:					
S35 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 Street Address

Amendment Section
Division of Corporations
Clifton Building

Articles of Amendment to Articles of Incorporation of

EXCEPTIONAL SPEECH THERAPY, INC

f known) Corporation adopts the following amendment(s) t
·
Corporation adopts the following amendment(s) t
The new
" or "incorporated" or the abbreviation sional corporation name must contain the
2015

<u> </u>
enter the name of the
ω
Florida

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)

Remove

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 PΤ John Doe V X Remove Mike Jones \underline{X} Add \underline{SV} Sally Smith Type of Action Title Name **Address** (Check One) PS 1) X Change JENNIFER R. OSORIO 10200 NW 25 STREET A 108 ____ Add DORAL, FL 33172 ____ Remove 2) ____ Change ____ Add ___ Remove 3) ____ Change ____ Add ____ Remove 4) ____ Change ____ Add ___ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change ____ Add

(Atta	mending or adding additional Articles, uch additional sheets, if necessary). (B	e specific)				
						
						-
	=======================================					
lf an pro	n amendment provides for an exchangovisions for implementing the amendm (if not applicable, indicate N/A)	e, reclassification in the contact of the contact o	on, or cancellat ined in the amo	ion of issued shar indment itself:	res,	
		-		· -		
						_

.

.

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
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 document's effective date on the Department of State's records.	late will not be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following staten must be separately provided for each voting group entitled to vote separately on the amendment(s):	aent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7/31/19	
Signature (By a director, president or other officer = 11 directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cou	
appointed fiduciary by that fiduciary)	ii (
(Typed or printed name of person signing)	
Presiden+ (Title of person signing)	

the

the