P13 000 062 688

(Requestor's Nam	e)
(Address)	
(Address)	
(City/State/Zip/Ph	one #)
_	_
PICK-UP WAIT	MAIL
(Business Entity N	lame)
(Document Numb	er)
Certified Copies Certifica	tes of Status
Special Instructions to Filing Officer:	1
Special mediactions to ming Officer.	
LPT	

Office Use Only



800394361448

09/14/22--01007--013 **35.00

SECRETAR CAPPARENTIANS

1 26 26 27

COVER LETTER

TO: Amendment Section Division of Corporations Olga Cenadic, P.A. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Olga Cenardic Esq Olsa Cenadia P.A. 4101 Ravenswood Rd # 314-A
Address Ft. Lawderdale FL 33312
City/ State and Zip Code Olga @ viptitleusa.com
E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: Olga Canadic, Esq. at (754) 777-3555

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 & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Olga Cenadi	c, P.A.
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P130000	121088
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4101 Ravenswood Rd # 314-A
	Ft Landerdale FL 33312
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4101 Ravenswood Rd # 314-A
	Ft. Landerdelle FL 33312
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	<u></u>
(Florida si	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New I	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)

Example:

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 Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		NA	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary). (Be specific	<i>′</i>			
	NIA					
						-
<u>.</u>					<u> </u>	
				 		
					. <u>. </u>	
						
						·
n amendmen	t provides for an ex uplementing the ar	change, reclass	ification, or ca	ncellation of iss	ued shares,	
(if not appli	cable, indicate N/A)	nenament it tio	t contained in	<u>in amendinent</u>	itseit.	
\sim	/A					
						<u> </u>
						·
						
						<u></u>

The date of each amend date this document was s	
Effective date <u>if applica</u>	ble:
	(no more than 90 days after amendment file date)
	d in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
Adoption of Amendmer	it(s) (CHECK ONE)
☐ The amendment(s) was action was not require	is/were adopted by the incorporators, or board of directors without shareholder action and shareholder d.
	us/were adopted by the shareholders. The number of votes cast for the amendment(s) vas/were sufficient for approval.
-	ss/were approved by the shareholders through voting groups. The following statement vovided 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_	September 7, 2022
Signati	
Signati	(By a director, president or 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)