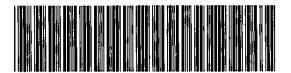
## 713000078766

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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T. LEMIEUX

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: PROGRESSIVE Professional Tax Services  DOCUMENT NUMBER: P130007891010
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GENOLA JONES
Name of Contact Person
Firm/ Company
1487 NE 1750t
MMB, F1. 33162
City/ State and Zip Code
Genal address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CADVOLA JOVES at (186) 212-3322  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 \$\bigcup \\$43.75 Filing Fee \& \bigcup \\$43.75 Filing Fee \& \bigcup \\$Certificate of Status \$\bigcup (Additional copy is enclosed)\$\$ (Addition
Mailing Address Amendment Section  Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32301

Clifton Building 2661 Executive Center Circle

**Division of Corporations** 

P.O. Box 6327 Tallahassee, FL 32314

## Articles of Amendment

to

Articles of Incorporation of

PROGRESSIVE PROFESSION	VAL TAX Services Inc	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P1:300007891do		
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is 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 "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered." "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". 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)	1481 NE 175 St. NMB, F1 33162	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent MARVIN	S. JENKINS	
1351 NE	STREET AND	
New Registered Office Address: /351 NC /	•	\
	NE 175St NMB, Fl. 33162	. )
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia		
Signature of New Registered	d Agent, if changing	
		9
		]

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: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check O : 2)	<u>Title</u> <u>Name</u>	Address
1) Change	1,	1/MB A 32119
Add	D MARVINIS JENKINS	1351 NE MIAMI GOULDY NOWE # 33179 + 15144
Remove	D MARVINIS. JENKINS D GENDLA JONES	1351 NE MIAMI GOULDY #151 NMB (F1 33/79
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
[ <del>]</del>		
6) Change		
Add		
Remove		

(Attach additional sheets, if necessary). (Be spec	
•	
	•
If an amendment provides for an exchange, rec	lassification, or cancellation of issued shares,
provisions for implementing the amendment if (if not applicable, indicate N/A)	
MARVINIS JENKINIS	100% Shaves
au	
William Table Table	

The date of each amendment(s) adoption: 12-05-15	, if other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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 Jelle Xene "	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12-05-13	
Signature / MACA MMS	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
GENDLA JULIES	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	<del></del>