## P130000 87354

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C. LEWIS
JUN 4 2044
EXAMINER

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: John Richert P.A. P13000087354 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Richert Name of Contact Person John Richert P.A. Firm/ Company 13575 58th St N Address Clearwater, FL 33760 City/ State and Zip Code jarichert@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Richert Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ■\$52.50 Filing Fee □ \$35 Filing Fee **□\$43.75** Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPROVEC AND FILES

## Articles of Amendment to Articles of Incorporation of

14 MAY 21 PM 1: 30 SECRLIARY 1: 31-11 TALLAHASSEE, FLORIDA

John Richert P.A.	
(Name of Corporation as currently filed with the F	lorida Dept. of State)
P13000087354	
(Document Number of Corporation (i	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Richert Quarles P.A.	. The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	<del></del>
	<del></del>
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
(Florida str	reet address)
New Registered Office Address:	Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	t:
I hereby accept the appointment as registered agent. I am familiar	
Signature of New Registered	Agent, if changing

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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Patrick Quarles	5337 1st Ave N
Add			St. Petersburg, FL
Remove			<del></del>
2) Change			N/A
Add			
Remove			
3) Change			N/A
Add			
Remove			- <u>-</u>
4) Change			N/A
Add			
Remove			<u> </u>
5) Change			N/A
Add			
Remove			
6) Change			N/A
Add			
Remove			

E. <u>If am</u> (Attac	E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
N/A					
_					
	A				
F. If an	amendment provides for an exchange, reclassification, or cancellation of issued shares,				
prov	visions for implementing the amendment if not contained in the amendment itself:				
N/A	(if not applicable, indicate N/A)				
IN/A					

AMMO AND FILES

## 14 MAY 21 PM 4: 30

The date of each amendment(s) a	doption: N/A	, if other than the
date this document was signed.	doption: N/A SELECTION OF THE TALL AND SELECTION OF THE ORIGINAL SELEC	_
Effective date if applicable: N//		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_5/18/14		
Signature	Mys Chall	_
	friedror, president or other officer – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	John A Richert	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	_