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COVER LETTER

TO: Amendment Section

Division of Corp	orations *		
NAME OF CORPO	RATION: TIMOTHY	I. MEENAN, P.A	۸.
DOCUMENT NUM	BER: P1400000277	<u> </u>	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	,
Please return all corre	spondence concerning this mat	ter to the following:	
	LEZLIE ALLEN		
		Name of Contact Person	ı
	MEENAN, P.A.		
		Firm/ Company	
	P.O. BOX 11247		
		Address	
	TALLAHASSEE,	FL 32312	
		City/ State and Zip Code	•
۱F	ZLIE@MEENANL	AWEIRM COM	
		ed for future annual report	notification)
	•	•	
For further information	on concerning this matter, pleas	e call:	
	·		
DAVID S. BI	EIDEL, CPA	_{at (} 850	893-6565
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 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)
	uiling Address		Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			
Tallahassee, FL 32314 Cinton Building Canton Building Canton Building Canton Building			
• ••			assee, FL 32301

Articles of Amendment to Articles of Incorporation of



TIMOTHY J. MEENAN P.A.

THE C. WILLIAM	./٦.			· /*3/
(Name of Corporation as	currently filed with the	Florida Dept. of State)		• /
P14000002776				
(Documer	nt Number of Corporation	(if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following ar	nendment(s) to
A. If amending name, enter the new na	me of the corporation:			
MEENAN, P.A.			Th	e new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corp	prporated" or the abbre	eviation
B. Enter new principal office address,	if annlicable:	N/A		
(Principal office address MUST BE A S		N/A		
		N/A		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		N/A		
		N/A		
		N/A		
D. If amending the registered agent an new registered agent and/or the new			name of the	
Name of New Registered Agent	N/A			
	N/A			
	(Florida	street address)		
New Registered Office Address:	N/A	, Flor	ida_N/A	
	(Ci	(y)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ions of the position.	
Si	gnature of New Registere	d 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 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	PT	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	N/A		
Add			
Remove			
2) Change	N/A		
Add			
Remove			
3) Change	N/A		
Add			
Remove			
4) Change	N/A		
Add			
Remove			
5) Change	N/A		
Add			
Remove			
6) Change	N/A		
Add			
Remove			

(Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
/A	(De specyle)
<u> </u>	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(g not applicable, malcule NA)	
1 A	
/A	

The date of each amendment(s) adoption: 01/13/2014	, if other than the
date this document was signed.	
Effective date if applicable: 01/13/2014	
(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	•
(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 03/12/2014	
Signature with Mum	
(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)	
TIMOTHY MEENAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	