## P14000013940

(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:

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## **COVER LETTER**

TO: Amendment Section Division of Corporation	.*		ı	1 6	
NAME OF CORPOR	$\boldsymbol{\nu}$	nced Acc	counting	SpecialistIn	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma			_	
	ARANKY TA	Name of Contact Person  Pirm/ Company  Swall  Address  City/ State and Zip Code  AND POR  Sed for future annual report	oth ter FL 330	MKIQUEZ SPRCIGIESTA DATA	
For further information	n concerning this matter, pleas				
LUA-M Name o	A - HENCIQ of Contact Person	at ( <u>954</u> Area Con	de & Daytime Telephone Nu	<u>(88)</u> umber	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment 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)	MAR - 6 PM	
Mailing Address			Address	O 3: 38	
Amendment Section Division of Corporations			ment Section n of Corporations	95 <b>8</b>	
P.O. Box 6327		Clifton	Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and dontain the word "corporation, "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		<del>_</del>		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		<del>_</del>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ttach additional sheets, if necessary).	(Be specific)	
*		
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.	<b>.</b>
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
11/2		

The date of each amendment(s) adoption	on: 2/2C	15	, if other than the
date this document was signed.			, , , o o
Effective date if applicable:			
	(no more than 90	days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were adopted by the shareholders was/were sufficient		number of votes cast for the amendr	nent(s)
The amendment(s) was/were approved must be separately provided for each			
"The number of votes cast for th	e amendment(s) was/were	e sufficient for approval	
by	(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)		
The amendment(s) was/were adopted action was not required.	by the board of directors v	without shareholder action and share	holder
The amendment(s) was/were adopted	by the incorporators witho	out shareholder action and sharehold	ler
action was not required.	1 _		
Dated3	2115		
Signature	and ferry	Dez	
ffiy a directo		er – if directors or officers have not	
	an incorporator – if in the duciary by that fiduciary)	hands of a receiver, trustee, or othe	r court
<del></del>	LJAW (Typed or pr	ARANKY HE	NRIQUEZ
	Dex	ESINGAH	
	7 1 2 (Title	le of person signing)	



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 24, 2015

LUANY ARANKY HENRIQUEZ ADVANCED ACCOUNTING SPECIALISTS INC 2852 SW 130TH TERR MIRAMAR, FL 33027

SUBJECT: ADVANCED ACCOUNTING SPECIALISTS INC

Ref. Number: P14000013940

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Page 4 of Articles of Amendment to Articles of Incorporation must be completed.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245,6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 515A00003881