## P14000016824

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CLAY BRESNAN	P.A.	
	BER: P 14000016824	- <u></u>	
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	CLAY BRESNAN		
·		Name of Contact Persor	1 .
	CLAY BRESNAN P.A.		
		Firm/ Company	
,	20892 TORRE DEL LAGO	ST.	
		Address	
	ESTERO FL 33928		
		City/ State and Zip Code	2
CLA	YBRESNAN@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	•	289-2942
	of Contact Person	at (239	_)
	or the following amount made		
\$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CLAY BRESNAN P.A.		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P14000016824		
(Document Number	of Corporation (if known)	- '
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following	ng amendment(s
A. If amending name, enter the new name of the corporation:		
CLAYTON BRESNAN P.A.		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered." "professional association," or the abbreviation	"Co". A professional corporation name musi	abbreviation
B. Enter new principal office address, if applicable:	19846 MARKWARD CROSSING	price and
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	ESTERO FL, 33928	<b>5</b> 8
		<u> </u>
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		- 등품 성
		<u> </u>
		· • • • • • • • • • • • • • • • • • • •
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the	
new registered agent and/or the new registered office addre		
Name of New Registered Agent		
		_
(Florida :	street address)	_
New Registered Office Address;	Florida	
New Kegisterea Office Address:	(City), Florida (Zip	Code)
•		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia		
	2 accept the congunities of the position.	
Charles (M.		<del></del>
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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	•		
Add			
Remove			
2) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
3)Change			
Add			
Remove			<del> </del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			·
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
,			
`			
		<u> </u>	
,	<u>, , , , , , , , , , , , , , , , , , , </u>		
,			
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or candment if not contained in	ncellation of issued shares, the amendment itself:	
			<u> </u>
			;
·			

The date of each amendment(s) adoption:	if other 's
date this document was signed.	•
10/24/16	•
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
<b>Note:</b> If the date inserted in this block does no document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date will not be listed state's records.
Adoption of Amendment(s) (CHI	ECK ONE)
The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) oproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	lment(s) was/were sufficient for approval
by	.,,
	ng group)
action was not required.	ncorporators without shareholder action and shareholder
10/10/16 Dated	
	40.
Signature (Ry a director desir	dent or other officer – if directors or officers have not been
	rporator – if in the hands of a receiver, trustee, or other court
. CLAY BRE	SNAN .
(′	Typed or printed name of person signing)
· PRESIDEN	r
	(Title of person signing)