## P14000034085

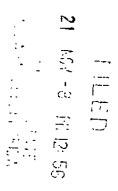
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T. LEMIEUX

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	IATION: JOE MOLEDO, P	. Λ.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Picase return all corres	pondence concerning this ma	atter to the following:	
	RONALD L. GRAHAM		
•		Name of Contact Perso	n
	RONALD L. GRAHAM & (	COMPANY, P. A.	
-		Firm/ Company	
	4713 CATTAIL LAGOON V	-	
•		Address	
	PONTE VEDRA BEACH, 1	FL 32082-3007	
•	-	City/ State and Zip Cod	e
rgral	nam l@aol.com		
	E-mail address:	(to be used for future annua	l report notification)
For further information	concerning this matter, plea	se call:	
ELISSA A. GRACE		at ( <sup>239</sup>	823-4449
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Divisio The Co	diment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

JOE MOLEDO, P. A.			
(Name of Corporation as	currently filed with the Florid	a Dept, of State)	· · · · · · · · · · · · · · · · · · ·
P14000034085			
(Documen	nt Number of Corporation (if known	wn)	
Pursuant to the provisions of section 607 Incorporation:	.1006, Florida Statutes, this corp	oration adopts the following	amendment(s) to its Articles
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A proj		
B. Enter new principal office address, (Principal office address MUST BE A S	<del></del> _		<del></del>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)			21 100
D. If amending the registered agent an new registered agent and/or the new		n Florida, enter the name of	the
Name of New Registered Agent	ELISSA A. GRACE		ST B
Hume of the Region and Ingent	4713 CATTAIL LAGOON WA	Y	धून झ
	(Florida street a	address)	
New Registered Office Address:	PONTE VEDRA BEACH	3208 , Florida	2-3007
	(City)		(Zip Code)
New Registered Agent's Signature, if c  I hereby accept the appointment as regist  Signature.	hanging Registered Agent:  ered agent. I am familiar with a  Grature of New Registered Agent,	٠	he position.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 1 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 = Cl. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office he 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 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 Chan 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)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Aff	mending or adding ad ach additional sheets, if	necessary). (Be spe	ecific)			
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lf a	n amendment provides	for an eychange rea	rlassification or es	uncellation of issue	d charce	
pro	ovisions for implement (if not applicable, indi	ing the amendment i	f not contained in	the amendment its	self:	
	(if not applicable, indi	cate N/A)				
/A						
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The date of each amendment(s date this document was signed.	s) adoption:	, if other than
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date very department of State's records.	vill not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action a	ind shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	n	
	(voting group)	
NOVEN Dated	MBER 4, 2021	
Signature	STOE Pholes	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	JOE MOLEDO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	