P1400038/51

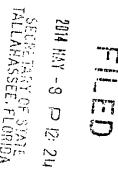
equestor's Name)				
ddress)				
ddress)				
ty/State/Zip/Phon	e #)			
☐ WAIT	MAIL			
usiness Entity Nar	me)			
ocument Number))			
Certificate	s of Status			
Special Instructions to Filing Officer:				
	ddress) ty/State/Zip/Phon WAIT usiness Entity Nai ocument Number			

Office Use Only



800257461598

05/08/14--01030--012 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KATHLEEN	N GOMEZ REAL	.TOR, P.A.	
DOCUMENT NUMB	_{ER:} P1400003815	1		
	of Amendment and fee are su			
Please return all corres	pondence concerning this mat	tter to the following:		
	Lisa Zahorian			
	11.55.15.15	Name of Contact Persor	l	
	Tax & Financial S	Strategists LLC		
-		Firm/ Company		
	28089 Vanderbilt	Dr., Suite 201		
·		Address	<u> </u>	
_	Bonita Springs, F			
		City/ State and Zip Code		
lisa	@wondertax.com	1		
	_	sed for future annual report	notification)	
For further information	concerning this matter, pleas	ee call:		
Lisa Zahoriar	1	at (239	405-8395	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	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)	
Mailing Address 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		

Articles of Amendment to Articles of Incorporation of

Kathleen Gomez Realtor, P.A.		
(Name of Corporation as currently filed with the Flor	rida Dept. of State)	_
P14000038151		
(Document Number of Corporation (if k	nown)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the corporation:		
Kathleen Gomez, P.A.		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.2"	". A professional corporation name must	bbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	A-24	-
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 new registered agent and/or the new registered office address:	<i>0</i> /12 1	
	m ≺ ∞	\$ ************************************
Name of New Registered Agent		
(Florida street	address)	
New Registered Office Address:	, Florida	_
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with		
Signature of New Registered Age	ent, 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:	, unu sui	iy smun, s	r us an Auu.	
X Change	<u>PT</u>	John Doe	2	
X Remove	<u>V</u>	Mike Jon	<u>ies</u>	
<u>X</u> Add	<u>sv</u>	Sally Smi	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>]	<u>Name</u>	Address
1) Change				
Add Remove				
2) Change Add		_ ·		
Remove				
3) Change Add				
Remove				
4) Change				
Add				
Remove				
5) Change Add				
Remove				
6) Change				
Add				
Remove				

ttach addition	r adding addinal sheets, if n	necessary).	(Be specific)	•		
•							
· · · · · ·							
					•		
				<u></u>		<u> </u>	
			 -				
							
		•					
							
							
							
' a		£		16 Al		- 6 ' 1 - 1	
rovisions for	ent provides i r implementii	ng the amen	ange, reciass	t contained in	<u>cancellation</u> n the amendr	<u>01 ISSUEA SN:</u> nent itself:	ires.
(if not app	olicable, indic	cate N/A)					
	à						
					<u></u>		
			<u></u>				
	<u> </u>						
	-		_				

The date of each amendment(s) adoption:	if other than the
-	
Effective date if applicable: (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 aniendment(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	
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 May 7th, 2014	
Signature (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)	···-
Kathleen Gomez	
(Typed or printed name of person signing)	
Aitle of person signing)	