## P14 0000 56819

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SECRETARY OF STATE
ALL AHASSET FLORIDA

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T SCHROEDER

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPO  | RATION: Cobb & Cobb, P.A                    | ·   |   |
|--|---|---|---|
| DOCUMENT NUM   | BER: P14000056819                           |   |   |
| The enclosed Articles  | of Amendment and fee are su                 | bmitted for filing.   |   |
| Please return all corre  | spondence concerning this ma                | tter to the following:  |   |
|  | Mary C. Cobb                                |   |   |
|  |   | Name of Contact Perso   | חל  |
|  | The Cobb Law Firm, P.A.                     |   |   |
|  |   | Firm/ Company   |   |
|  | 431 Stowe AVE                               |   |   |
|  |   | Address   |   |
|  | Orange Park, FL 32073                       |   |   |
|  |   | City/ State and Zip Coo   | de  |
|  | a aabb@amail aam                            |   |   |
| mary   | c.cobb@gmail.com                            | 16. 6.  |   |
|  | rman address, (to be u                      | sed for future annual repor   | t notification)   |
| For further information  | on concerning this matter, plea             | se call:  |   |
| Mary Cobb  |   | 904<br>at (   | 269-5800  |
| Name of Contact Person   |   | Агеа С  | ode & Daytime Telephone Number  |
| Enclosed is a check for  | or the following amount made                | payable to the Florida Dep  | partment of State:  |
| \$35 Filing Fee  | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  | ☐S52.50 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

| Cobb & Cobb, P.A.   |                            |                              |                    |  |              |
|---|----------------------------|------------------------------|--------------------|--|--------------|
| (Name of Corporation a  | s currently filed w        | ith the Florida Dept.        | . of State)        |  |              |
| P14000056819  |                            |                              |                    |  |              |
| (Document   | Number of Corpora          | ition (if known)             |                    |  |              |
| Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:   | tutes, this <i>Florida</i> | <b>Profit Corporation</b> ad | opts the followi   | ng amendi  | ment(s)      |
| A. If amending name, enter the new name of the corpor   | ration:                    |                              |                    |  |              |
| The Cobb Law Firm, P.A.   |                            |                              |                    | The n  | <i>ሮ</i> ነኑ' |
| name must be distinguishable and contain the word "c<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "word "chartered," "professional association," or the abbi | Inc." or "Co". A           |                              |                    | abbreviati                                       | on           |
| B. Enter new principal office address, if applicable:   | -                          |                              | <u> </u>           | <i>s</i>   | _            |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   |                            |                              | }خ<br>ز <:         | : <b>9</b>                                       |              |
|   |                            |                              | <u> </u>           | <del>7 3</del>                                   | <u> </u>     |
|   | <u></u>                    |                              | (S)                |  | - }          |
| C. Enter new mailing address, if applicable:  |                            |                              | وأتأ               | ₹ ₹  |              |
| (Mailing address MAY BE A POST OFFICE BOX)  |                            |                              | <u>~</u>           | 2 UD   |              |
|   |                            |                              | 25                 | Ξ ω.   |              |
|   | <del></del>                | <del> </del>                 | <u> </u>           | <del>"                                    </del> | -            |
|   |                            |                              | •.``               |  | <del>-</del> |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office  |                            | lorida, enter the nam        | ne of the          |  |              |
| Name of New Registered Agent  |                            |                              |                    |  |              |
|   |                            |                              |                    | <del></del>                                      |              |
|   | (Florida street uddre.     | 55)                          | <del>.</del>       | _  |              |
| New Registered Office Address:  |                            |                              | . Florida          |  |              |
| Hen Registered Office Nations.  | (City)                     | ·                            |                    | Code)  | _            |
|   |                            |                              |                    |  |              |
|   |                            |                              |                    |  |              |
| New Registered Agent's Signature, if changing Register  |                            | annene ela al·linaciona      | Calo               |  |              |
| I hereby accept the appointment as registered agent. I am   | i jaminar wiin ana         | ассері іне обиданові         | s oj tne position. | •  |              |
|   |                            |                              |                    |  |              |
|   |                            |                              |                    |  |              |
| Signatur  | e of New Registered        | 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.

| 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<br>(Check One) | <u>Title</u> | <u>Name</u>  | <u>Addres</u> s         |
| 1) Change                     |              | <del> </del> |                         |
| Add                           |              |              |                         |
| Remove                        |              |              |                         |
| 2) Change                     |              |              | APP -                   |
| Add                           |              |              | NISSEL<br>VSSEL         |
| Remove                        |              |              |                         |
| 3 ) Change                    |              |              | 9: 38<br>STATE<br>10RD, |
| Add                           |              |              |                         |
| Remove                        |              |              | <del></del>             |
| 4) Change                     |              |              |                         |
| Add                           |              |              |                         |
| Remove                        |              |              | <del></del>             |
| 5) Change                     |              |              |                         |
| Add                           |              |              |                         |
| Remove                        |              |              |                         |
| 6) Change                     |              |              |                         |
| Add                           |              |              |                         |
| Remove                        |              |              |                         |

| If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific) |                                 |   |
|---|---------------------------------|---|
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|   | <b>3</b>                        |   |
| If an amendment provides for an exchange, reclassification, or cancellation of issued shares,                           | 19<br>- L. S.E.C.               |   |
| provisions for implementing the amendment if not contained in the amendment itself:                                     | APR I                           |   |
| (if not applicable, indicate N/A)   | R I                             |   |
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| The date of each amendment(s) adoption:   | _, if other than the      |
|---|---------------------------|
| date this document was signed.  |                           |
| Effective date if applicable:   | <del></del>               |
| (no more than 90 days after amendment file date)  |                           |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.   | not be listed as the      |
| 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)   |                           |
| (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 4/9/19  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)  Mary C. Cobb  (Typed or printed name of person signing) | FILED  19 APR 12 AM 9: 38 |
| (Title of person signing)   |                           |