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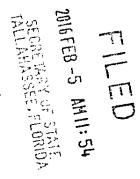
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Amend Mane FEB 08 2016 Ch 8

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: THE LASHENKA	TEAM, PA	·		
DOCUMENT NUMBER: P14000068791					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	condence concerning this ma	tter to the following:			
]	BJ Cottrell				
-		Name of Contact Person	í		
	Cottrell Tax & Accounting				
-		Firm/ Company			
	5147 Castello Drive				
-		Address			
	Naples, FL 34103		•		
-		City/ State and Zip Code	3		
admin	@cottrelltax.com		•		
	~	sed for future annual report	notification)		
		•	•		
For further information	concerning this matter, pleas	se call:			
BJ Cottrell		239	449-4881		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	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			<u>Address</u>		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE LASHENKA TEAM, PA

(Neme o	f Corporation as currently	y filed with the Florida Dept. of State)	
P14000068791	Corporation as current	THE WAS THE LIGHT TERM OF SHAPE	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
Robert Peter Lashenka, PA			The new
	ation "Corp," "Inc," or "	n," "company," or "incorporated" or the abo Co". A professional corporation name must co P.A."	
B. Enter new principal office address, i (Principal office address MUST BE A ST		12 SK	
C. Enter new mailing address, if appli- (Mailing address MAY BE A POST C			5 5 5
D. If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	Cottrell Tax & Accounting	, LLC	
	5147 Castello Drive		
	(Florida str	eet address)	
New Registered Office Address:	Naples	Florida 34103	
THE PROPERTY OF THE PARTY OF TH		(City) (Zip C	ode)
New Registered Agent's Signature, if cl I hereby accept the appointment as registed.	nanging Registered Agent ered agent. I am familiar v	, , , , , , , , , , , , , , , , , , ,	· .

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	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				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
R	eal Estate		
	•		
•			
 .			
DEO	amendment provides for an exchange, reclassification, or cancellation of issued shares, islans for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)		

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	t(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	menl
"The number of votes cas	for the amendment(s) was/were sufficient for approval	-
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	lder
The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
./	as his	
Dated	25/16	
Simulation	31 H Calmba	
Signature (By a	director, president or other officer - if directors or officers have not bee	en
	ed, by an incorporator - if in the hands of a receiver, trustee, or other co	
appoi	nted fiduciary by that fiduciary)	
	LASHENKA, ROBERT	
	(Typed or printed name of person signing)	
	PVTS	
	(Title of person signing)	