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JUL 27 2015
R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Payor Law Group,	P.A.	
DOCUMENT NUM	P14000072193		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Margaux Payor		
		Name of Contact Person	<u> </u>
	Payor Law Group, P.A.		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	100 S. Ashley Drive, Suite 6		
		Address	
	Tampa, FL 33602		
		City/ State and Zip Cod	e
payo	orlaw@gmail.com		
• • •		sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Margaux Payor		at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or 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)
Am Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio Clifton	Address dment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

15 JUL 24 AM 5: 54

Payor Law Group

(<u>Name (</u>	of Corporation as curren	tly filed with the Florida Dept. of State
P14000072193		MELATIAGGEE, PLURIDA
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
3. Enter new principal office address,	if applicable:	100 South Ashley Drive, Suite 600
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		Tampa, FL 33602
C. Enter new mailing address, if applications (Mailing address MAY BE A POST)		100 South Ashley Drive, Suite 600
		Tampa, FL 33602
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	Margaux L. Payor	
Name of New Registered Agent	100 South Ashley Drive,	Suite 600
		treet address)
New Registered Office Address:	Tampa	, Florida 33602
		(City) (Zip Code)
New Registered Agent's Signature, if c	hanging Degistered Agen	·*•
		with and accept the obligations of the position.
. /a	1	\bigcap
\ . //\	Un and I	<i>1</i> .
	Signature of New	Registered Agent, if changing
-	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 <math>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:			45 477 27447		
X_Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jone	<u>s</u>		
X Add	<u>sv</u>	Sally Smith	<u>h</u>		
Type of Action (Check One)	<u>Title</u>	N	lame		<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					

f amending o'r adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable:
(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 not be listed as the document's effective date on the Department of State's records.
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.
July 20, 2015
Dated
simum / My must (de
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 fighciary by that fiduciary
Margaux L. Payor
(Typed or printed name of person signing)
Director/Registered Agent
(Title of person signing)