## P14000080506

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(Ad	dress)	
(Adi	dress)	
(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

11-18-14

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: SABK, P.	٩.	
DOCUMENT NUMI	BER: P140000805	606	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Warren Sponsle	er	
		Name of Contact Person	1
	SABK, P.A.		
		Firm/ Company	
	100 South Ashle	ey Dr. Ste. 215	60
		Address	
	Tampa, FL 336		
		City/ State and Zip Code	e
ws	ponsler@sponsl	lerbishop.com	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call;	
Warren Spo	nsler	at ( <b>813</b>	, 330-3210
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	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)
	ling Address		Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	
a secondary and dad t		Tallahassee, FL 32301	

## **Articles of Amendment** to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

14 NOV -6 AM 9: 36

SABK, P.A.	
(Name of Corporation as currently file	d with the Florida Dept. of State)
P14000080506	
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida S at Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
Sponsler, Bishop, Koren & Han	nmer, P.A.
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	100 South Ashley Dr. Ste 2150
(Principal office address MUST BE A STREET ADDR	Tampa, FL 33602
	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	100 South Ashley Dr. Ste 2150
	Tampa, FL 33602
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent Warren	Sponsler
100 Sou	th Ashley Dr. Ste. 2150
	(Florida street address)
New Registered Office Address: Tampa	, Florida 33602
	(City) (Zip Code)
× W	tered Agent: am familiar with and accept the obligations of the position.  Registered 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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name V/	<u>Addres</u> s
1) Change	<del></del>		
Add Remove			
2) Change			
Add Remove			
3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change	<del></del>		
Add			
Remove			

Page 2 of 4

amending or adding additional Arti stach additional sheets, if necessary).	(Be specific)	W/A
	<del> </del>	
	··· · · · · · · · · · · · · · · · · ·	
	<u></u>	
<u> </u>		
an amendment provides for an exch	iange, reclassific	cation, or cancellation of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not co	ontained in the amendment itself:
(y not appricable, maicule WA)		N/A
		_/A
**************************************		

	SECRETARY OF STATE SUBJECTOR OF CORPORATIONS	
The date of each amendment(s) adoption date this document was signed.	BIVISION OF CORD COM	, if other than the
date this document was signed.	14 NOV -6 AM 9: 36	
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 by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.	
	by the shareholders through voting groups. The following statement of the 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)	
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder	
Dated 11/5/		
Signature		
	president or other officer - if directors or officers have not been	<del></del>
selected, by an	incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)	
Warr	en Sponsier	
	(Typed or printed name of person signing)	
_Fou	nder President	
	(Title of person signing)	