P14000096878

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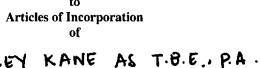
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: MICHE	LLE AND HARLEY KANE AS TO	.E., P.A.
DOCUMENT NU	-	_	5
The enclosed Artic	cles of Amendment and fee are s	submitted for filing.	16 1801 -4 M 9: 54
Please return all co	orrespondence concerning this m	natter to the following:	2 %
			- G
	MICHELLE	Name of Contact Person	COMPONENT OF STREET
	1 400 1 43.25		ي بې ک دی
•	KANE LAW	IERS, PLLC	T
		Firm/ Company	
	4801 LINTO	N BLVD . STE. 11A-655	
		Address	
	DELRAY BE	ACH , FL 33445	
	•	City/ State and Zip Code	
	MICHELLERK	ANE LAWYERS. COM	
		used for future annual report notification)	
		·	
For further informa	ation concerning this matter, plea	ase call:	
		561 391-0383	
THOMAS	FLANARAN, ESE	Q. at (954) 608 - 1765	
Nai	me of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount made	e payable to the Florida Department of State:	
/	_		
\$35 Filing Fee	£ \$43.75 Filing Fee & Certificate of Status	Certified Copy Certificate of Status	-
	·	(Additional copy is Certified Copy enclosed) (Additional Copy	
		is enclosed)	
1	Mailing Address	Street Address	
Ī	Amendment Section	Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
	1 allanassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment



AND HARLEY KANE (Name of Corporation as currently filed with the Florida Dept. of State) P140000968

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

A. If amending name, enter the new nam	_	ion:
MICHELLE J. KANE name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	in the word "corp ion "Corp," "Inc,	The new poration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		GBOI LAKE WORTH RD
		DUITE 320
		GREEN ACRES, PL 83467
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		6801 LAKE WORTH RD
·		SUITE 320
		GREEN ACRES, FL 33467
D. If amending the registered agent and/ new registered agent and/or the new in the new		ce address in Florida, enter the name of the ddress:
•		
—	(Flo	rida street address)
New Registered Office Address:	AIN	, Florida
		(City) (Zip Code)
lew Registered Agent's Signature, if cha hereby accept the appointment as register.		Agent: miliar with and accept the obligations of the position.
	N/A Signature of	New 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: $|\nabla|/A$

(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: X Change	<u>PT</u>	John Do	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	ones_			
X Add	<u>sv</u>	Sally Sr	nith			
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						
Remove						
6) Change		_				
Add						
Remove						

If amending or adding additional Artic Attach additional sheets, if necessary).	cles, enter change(s) here: N/A (Be specific)
·	-
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
	ndment if not contained in the amendment itself:
,	ACCOUNT OF BAID HAR FULLDAIN SE
•	MICHELLE AND HARLEY KANE AS
TENANTS BY THE EN	YTIRETIES QUITCLAIMED ALL SHARES
OF STOCK TO MIC	CHELLE J. KANE.
,	
	•

The date of each amendment(s) adoption:	, if other than
Effective date if applicable: 30 15 (no more than 90 days after amendment file days	te)
Note: If the date inserted in this block does not meet the applicable statutory filing requireme document's effective date on the Department of State's records.	ents, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arm by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required.	reholder
Signature (By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
MICHELLE J. KANE	
(Typed or printed name of person signing)	
PRESIDENT / OWNER	
(Title of person signing)	

the

the