## P150000008530

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SECRETARY OF STATE A

Amend Name Chs

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations						
NAME OF CORPORATION: Ava	M Torres, P.A					
DOCUMENT NUMBER: P15000	DOCUMENT NUMBER: P15000008530					
The enclosed Articles of Amendment and fee are su	bmitted for filing.					
Please return all correspondence concerning this ma	tter to the following:					
- Ana 1	Name of Contact Person					
- Ana N	TDY(es, P.A) Firm/Company					
9291	JW 114 St, #2					
Hialech	Gardens FL 33018 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please	se call:					
Ana Torres	at ( 305 ) 600 - 8377  Area Code & Daytime Telephone Number					
Name of Contact Person						
Enclosed is a check for the following amount made	payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  ☐\$52.50 Filing Fee 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 (Name of Corporation as currently filed with the Florida Dept. of State) 500000 8530 (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 its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Herreria Dives name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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:

(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 Do	<u>se</u>			
X Remove	<u>v</u>	Mike Jo		( )		
				$\rho$	A	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	`	1,	
Type of Action (Check One)	Title		<u>Name</u>			<u>Addres</u> s
1) Change	<del></del>	_				
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ovisions for implementing	the amendment if not con	tion, or cancellation of issued share tained in the amendment itself:	<u>S.</u>
(if not applicable, indicate	e N/A)		
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		2/K	
		) / K	

The date of each amendment(s) adoption:	11/18/16	, if other than the
date this document was signed.	,	
Effective date if applicable:	11/18/16	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State		his date will not be listed as the
Adoption of Amendment(s) (CHECK	CONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approx		ment(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting group.		
"The number of votes cast for the amendmen	nt(s) was/were sufficient for approval	
hy(voting g	, , , , , , , , , , , , , , , , , , ,	
(voting g	roup)	
The amendment(s) was/were adopted by the board action was not required.	l of directors without shareholder action and share	eholder
The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action and sharehold	ler
Dated		
Signature	. Sove	
(By a director, president	or other officer – if directors or officers have not	
	ator - if in the hands of a receiver, trustee, or othe	r court
appointed fiduciary by the	iat inductary)	
<i>f</i>	ana M Torres	
(Туре	ed or printed name of person signing)	
	President	
	(Title of person signing)	