

P15000018388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

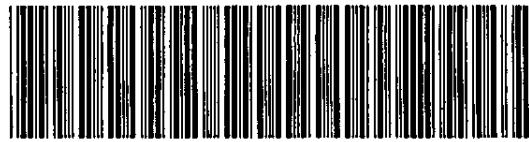
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 22 PM 4:21

MAR 23 2016
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2015

JOSE F SANCHEZ***2ND MAILING***
TAX PROS FRANCHISING INC
5309 N.W. 79TH AVE.
MIAMI, FL 33166

SUBJECT: TAX PROS FRANCHISING INC
Ref. Number: P15000018388

16 MAR 22 PH W: 21
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 215A00024652

16 MAR 22
11:08
FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32314
www.sunbiz.org

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TAX PROS FRANCHISING INC

DOCUMENT NUMBER: P15000018388

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE F SANCHEZ

Name of Contact Person

TAX PROS FRANCHISING INC

Firm/ Company

~~6855 SW 40 STREET SUITE B~~ 5309 N.W. 79 AVE

Address

MIAMI FL 33166

City/ State and Zip Code

JOE@TAXPROS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE F SANCHEZ 305 at (607-2233)
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
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

16 MAR 22 PH 4:21
DIVISION OF CORPORATIONS
SECRETARY OF STATE
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Articles of Amendment
to
Articles of Incorporation
of
TAX PROS Franchising INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

P15000018388
(Document Number of Corporation (if known))

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DIVISION OF CORPORATIONS
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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:

The new 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)**

5309 NW 79TH AVE

MIAMI FL 33166

**C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)**

5309 NW 79TH AVE

MIAMI FL 33166

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 _____
(City) _____ (Zip Code) _____

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 PTD 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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>P</u>	JOSE SANCHEZ	5309 NW 79TH AVE
			MIAMI FL 33166
2) <u> </u> Change	<u>PS</u>	GIRALDO SANCHEZ	6855 SW 81 STREET STE 290
			MIAMI, FL 33143
3) <u> </u> Change			
4) <u> </u> Change			
5) <u> </u> Change			
6) <u> </u> Change			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

11/11/2015

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

11/11/2015

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)

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.

11/11/2015
Dated _____

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 fiduciary by that fiduciary)

Jose F. Sanchez
(Typed or printed name of person signing)
President
(Title of person signing)