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AUG 19 2015 R. WHITE 5 AUG 17 AM IA 55

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Welissa K. Hancoc	c. P. A.
DOCUMENT NUMBER: P15000020736	
The enclosed Articles of Amendment and fee are submitted for filin	g.
Please return all correspondence concerning this matter to the follow	ving:
Melissa K Hancoo Name of Con	ntact Person
Melissa X Ha	neack, P.A.
Firm/ Co	ompany
PO Box 77113	8
Add	
Ocala, FL 341	179
City/ State a	
E-mail address: (to be used for future an	nual report notification)
Melissa K Hancock at (	352 ) 814-3325  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the F	lorida Department of State:
\$35 Filing Fee	opy Certificate of Status
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** Articles of Incorporation

of

15 AUG 17 AM 4: 55 Melissa K. Hancock, P.A. (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLURIDA P15000020736 (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: 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." 7500 SW 61st Ave., Suite 800 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Ocala, Florida 34476 C. Enter new mailing address, if applicable: Post Office Box 771138 (Mailing address MAY BE A POST OFFICE BOX) Ocala, Florida 34477 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: NIA Name of New Registered Agent 7500 SW 61st Avc. Suite 800 (Florida street address) Ocala New Registered Office Address: (City) 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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change		
Add		
Remove		
2) Change		
Add	ſ	
Remove		
3) Change		1
Add		
Remove		
4) Change		
Add	·	
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

<u>If amending or adding additi</u> Attach <i>additional sheets, if ne</i>	onal Articles, ente cessury). (Be spe	er change(s) her ecific)	<u>e</u> :		
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f an amendment provides fo	er an exchange, re	classification, o	r cancellation of	ssued shares,	
provisions for implementing (if not applicable, indica	the amendment ite N/A)	if not contained	in the amendmer	<u>ıt itself:</u>	
	N)	A			
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July 15, 2015	
The date of each amendment(s) adoption:	, if other than the
July 15, 2015	
Effective date <u>if applicable</u> :  (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 widocument's effective date on the Department of State's records.	Il not be listed as the
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.	
Dated 08 13 15	
Signature Melissa K. Homeock	
(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)	
Melissa K Hancock (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	