P15000024493

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FEBOT 2017 CMCHAIR

COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Clint Edge Roberson Name of Contact Person Edge Law, P.A. Firm/Company 27524 Cashford Cir. Ste 102 Address Welsey Chapel, FL 33544 City/ State and Zip Code clintr@edgelawpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of

Alge Law, I .A.	~ ~
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P15	5000024493 3
(Docume	ent Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida S s Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corp	poration:
	The new
ame must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp," ord "chartered," "professional association," or the a	" "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADD</u> E	<u>RESS</u>)
	-
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	0
. If amending the registered agent and/or registere	
new registered agent and/or the new registered of	ffice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Regis	stered Agent: am familiar with and accept the obligations of the position.
nereo, accept me appointment as registered agens.	un 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	v	Krista Mae Anderson	27524 Cashford Cir.
X Add			Ste. 102
Remove			Wesley Chapel, FL 33544
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			***
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
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F. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
Krista Mae Anderson (dob 6/10/80) hereby	holds 50% ownership of Edge Law, P.A.
Clint Edge Roberson (dob 8/6/85) continue:	s to hold the other 50%.
*** · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	if other t	than the
Effective date <u>if applicable</u> :		
(no n	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State's	et the applicable statutory filing requirements, this date will not be listed a records.	d as the
Adoption of Amendment(s) (CHECK (<u>ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	nolders. The number of votes cast for the amendment(s) al.	
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment	t(s) was/were sufficient for approval	
by(voting gra	oun)	
	of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incorporaction was not required.	orators without shareholder action and shareholder	
Febraury 1, 2017 Dated		
Signature		
(By a director, president or	or other officer – if directors or officers have not been or – if in the hands of a receiver, trustee, or other court at fiduciary)	
Clint Edge Robers	son	
(Туред	or printed name of person signing)	
President		
	(Title of person signing)	