Florida Department of State

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(((H15000098208 3)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN NIGHT OWL VISION ASSOCIATES, P.A.

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Certified Copy	1
Page Count	06
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Corporate Filing Menu

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APR 23 2014

COVER LETTER

TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION: Night Owl Vision	Associates, P.A.	
DOCUMENT NUM	BER: P15000030136		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Cheyenne Moseley		
		Name of Contact Person	1
	LegalZoom.com, Inc.		
		Firm/ Company	
	100 W. Broadway Suite 10	30	
	,	Address	
	Glendale, CA 91210		
		City/ State and Zip Code	È
gma	arc101@gmail.com	·	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Cheyenne Moseley	<i>t</i>	at (323	962-8600 ext 7950 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	ertment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	2543.75 Filing Fcc & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section			Address ment Section
Div	vision of Corporations	Divisio	n of Corporations
	D. Box 6327		Building
13.	llahassee, FL 32314		xecutive Center Circle assee, FL 32301

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Articles of Amendment to Articles of Incorporation of	SECRETALAHA	0
NIGHT OWL VISION ASSOCIATES, P.A.		3 F
(Name of Cornoration as currently filed with the Florida Dept. of State)	(1)	
P15000030136		
(Document Number of Corporation (if known)	TAT	ي -
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fiorida Profit Corporation:	tion adopts the following amendment(s) to	2
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "company," or "in "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional essociation," or the abbreviation "P.A."	corporated" or the Appreviation orporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new malling address, if applicable: (Manung address MAY BE A POST OFFICE BOX)		
D. If amending the registered escat and/or registered office address in Florida, enter the new registered agent and/or the new registered office address: Name or New Registered Agent	e name of the	
(Fibrida evant address)	**************************************	
New Registered Orrice Address:, FI	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: / nereby addept the appointment se registered agent. / am raminar with and addept the builty	ietions of the position,	
Signature of New Registered Agent, if anonging		

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If amending	the Officers and/or Directors, enter the fitle and name of each officer/director being removed and fitle, name, as	ıd
address of e	ach Officer and/or Director being added:	

(Attach additional sharts, if necessary)

Please note the entimentalization title by the first letter of the affine title.

P = Provident; V= View Provident; T= Tressurer; S= Secretary; D= Director; TR= Trustes; C = Chairman or Clark; CEO = Chief Executive Officer; CFO = Chief Energies Officer; It an officer/director holds more than one title, list the first letter of each office held. President, Tressurer, 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 shonge. Mike Janes leaves the corporation, Salty Smish is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

Example:		Total Day	
X Change	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	SY	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	T, S	Danielle Leigh Gordon	3571 25th Ave SW
Add			Naples, FL 34117
Remove			
2) Change			
Add			
Remove			
3) Change			-
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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Attach 🚁	ng or adding ad sissens sheets, it	7 naoessary).	(Be epecific)	DECENTIFICATE:		
						
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	nenen en e	W1W5-77		*- ***********************************	و فعالم مد مد مساسعات شوار کاند استان افغان از بارستان با بازید از استان استان استان استان استان استان استان ا	
					····	
r an amer provision (r as	idment provide is for inviewen is applicable, inc	es for an excha ting the amen	inge, reclassifi dment if not c	cation, or canc ontained in the	ellation of lasues amendment itse	l shares, elf:
	··					
				· · · · · · · · · · · · · · · · ·		

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The date of each amendme	ent(s) adoption: 4/13/2015	if other than the
date this document was sign	ed.	
Effective date if applicable		
	(NO MORA than 90 days after amendment file date)	
Adoption of Amendment(s) (<u>Check one</u>)	
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	were approved by the shareholders through voting groups. The rollowing statement idea for each voting group antitled to vote asparately on the amendment(s).	
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval	
ъу	(voting group)	
	, (voting group)	
The amendment(s) was/v action was not required.	were adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/v action was not required.	were adopted by the incorporators without shareholder action and shareholder	
Dated	4/17/15	
Signature	Mr. Margar	
J	(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)	_
	Maro Aaron Gordon	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	