P15000030594

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

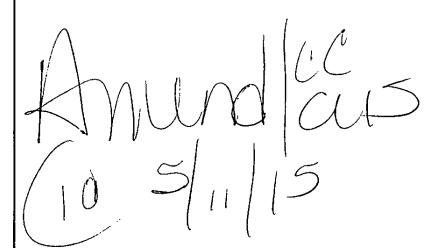




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SECRETARY OF STATE OF COST OF A 3: 34



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MOTA LAW FIRM	1 P.A.	- 		
DOCUMENT NUMBI					
The enclosed Articles o	f Amendment and fee are sub	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
j	FRANCIS MOTA				
~		Name of Contact Person			
1	MOTA LAW FIRM P.A.				
_	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
i	P.O. BOX 260302				
-	Address				
I	PEMBROKE PINES, FLORI	DA, 33026			
_		City/ State and Zip Code			
МОТА	LAWFIRM@GMAIL.COM				
	-	ed for future annual report r	notification)		
	Li man address. (to be as	ou for fatalo aminus report i	ionination)		
For further information	concerning this matter, please	e call:			
FRANCIS MOTA		at (<u>305</u>	781-5705		
Name of	Contact Person	Area Cod	e & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fce	□\$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)		
Amer Divis P.O. 1	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation of



MOTA LAW FIRM P.A.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)
P15000030594		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
N/A		The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable:		6625 MIAMI LAKES DRIVE EAST
(Principal office address MUST BE A S		SUITE 489
		MIAMI LAKES, FLORIDA 33014
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	N/A	
	N/A	
	(Florida s	treet address)
New Registered Office Address:	N/A	, Florida N/A
		(City) (Zip Code)
New Registered Agent's Signature, if c		(City) (Zip Code)
_,	Signature of New	Revistered 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) N/A Change	N/A	N/A	N/A	
Add				
Remove				
2) N/A Change	N/A	N/A	N/A	
Add				
Remove 3) N/A Change	N/A	N/A	N/A	
Add				
Remove				
4) N/A Change	N/A	N/A	N/A	
Add				
Remove				_
5) N/A Change	N/A	N/A	N/A	_
Add				
Remove				_
6) N/A Change	N/A	N/A	N/A	
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
AMENDMENT TO PURPOSE OF PROFESSIONAL CORPORATION
-THE PRACTICE OF LAW
· · · · · · · · · · · · · · · · · · ·
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)
N/A

4/27/15	10 - 41 41 45 -
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
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 document's effective date on the Department of State's records.	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)	
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.	
4/27/15	
Dated	
$\mathcal{L}_{\mathcal{L}}$	
Signature 7 M	
(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)	
appointed fiduciary by that reductary)	
FRANCIS MOTA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	