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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: THE RAPACKE I	LAW GROUP, P.A.	
DOCUMENT NUMBI	ER: P15000040577		
	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
A	ANDREW RAPACKE, ESÇ).	
_		Name of Contact Person	1
า	THE RAPACKE LAW GRO	OUP, P.A.	
_		Firm/ Company	
ϵ	518 E. SOUTH STREET, SU	JITE 500	
_	 	Address	-912-1
(ORLANDO, FL 32801		
_		City/ State and Zip Code	e
andu@	arapackelaw.com		
anuy@	•	sed for future annual report	notification
	E-man address, (to be di	sed for future armual report	nouncation)
For further information	concerning this matter, pleas	se call:	
Andrew Rapacke, Esq.		at (_407	801-9368
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

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(Name of Co	orporation as currently filed with the l	Florida Dept. of State)
	P15000040577	was .
	(Document Number of Corporation (if I	known)
ursuant to the provisions of section 607.1006 s Articles of Incorporation:	, Florida Statutes, this Florida Profit Co	orporation adopts the following amendment
. If amending name, enter the new name o	of the corporation:	
HE RAPACKE LAW GROUP, P.A.		The new
ume must be distinguishable and contain in Corp.," "Inc.," or Co.," or the designation ord "chartered," "professional association,	a "Corp," "Inc," or "Co". A professi	or "incorporated" or the abbreviation
. Enter new principal office address, if ap Principal office address <u>MUST BE A STREI</u>		
(Mailing address <u>MAY BE A POST OFF</u>) If amending the registered agent and/or	registered office address in Florida, e	nter the name of the
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, e	nter the name of the
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or	registered office address in Florida, e	nter the name of the
. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, e	nter the name of the
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, e	nter the name of the

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nęs</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				·
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add	····			
Remove				
Komove				And the second s
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		<u>.</u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	nt(s)
	oproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareho	lder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
6/17/201	5	
DatedSignature	Andy-	
(By a selec	director, president or other officer – if directors or officers have not be ted, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	ANDREW RAPACKE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	