## P15000081518

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OCT 1 1 2021 S. PRATHER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION:	hary L. Catanzaro, PA	
DOCUMENT NUM	P15000081518 BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Zachary L. Catanzaro		
	Law Offices of Zachary L. Ca	Name of Contact Person stanzaro, PA	1
	7000 W. Palmetto Park Road,	Firm/ Company Suite 210	
	Boca Raton, Florida 33-433	Address	
		City/ State and Zip Code	e
	zachary@zlelaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Zachary L. Catanzaro		561	247-3242
Name (	of Contact Person	at ( Area Co	) de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

		of		
Law Offices of Zachary L. Catanzaro, PA			<b>2021</b> SEL TALL	
( <u>Name of</u> P15000081518	Corporation	s currently filed with the Florida Dept.	of State) AFE	 
<del></del> -	(Docume	Number of Corporation (if known)	iπ '	T 7
Pursuant to the provisions of section 607.1 its Articles of Incorporation:				
A. If amending name, enter the new nar	ne of the cor	oration:	₽	
			The new	
name must be distinguishable and contain t "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	erp," "Inc,"	"Co". A professional corporation na	ime must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
		Boca Raton, Florida 33433		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7000 W. Palmetto Park Roa	d	
		Suite 210		
		Boca Raton, Florida 33433		
D. If amending the registered agent and new registered agent and/or the new			ie of the	
Name of New Registered Agent 7000 W. Palmetto Park Road, Suite 210				
	Boca Raton	(Florida street address)	33433 Florida	
		(City)	(Zip Code)	
<u>New Registered Office Address:</u> New Registered Agent's Signature, if ch	anging Regis	(City)	Florida(Zip Code)	

Signature of New Registered Agent, if changing

## Check if applicable

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 Doc is tisted 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	V	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			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add		<del></del>	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			-
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<del></del>	
If an amendment provides for an eych	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)	<del></del>
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than	90 days after amendment file date)
Note: It' the date inserted in this block does not meet the appl document's effective date on the Department of State's records.	icable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. To by the shareholders was/were sufficient for approval.	ne number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/w	ere sufficient for approval
by	2021
(voting group)	ARE SE
Sept. 27, 2021	FILIP 30 P 30 ASSE
Dated	
	D)F SI
	ASSEE, FLORIDA  ASSEE, FLORIDA  icer – if directors or officers have not been he hands of a receiver, trustee, or other court
(Typed or printed	I name of person signing)

(Title of person signing)