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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: National Crimi	inal Defense Group, P.A.	
DOCUMENT NUMBER: P15000087972		
The enclosed Articles of Amendment and fee ar	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Peter Feldman, Esq.	•	
	Name of Contact Person	n
	Firm/ Company	
155 E. Blue Heron Blvd,	Suite 300	
	Address	
West Palm Beach, FL 334	404	
.	City/ State and Zip Cod	e
peter@peterfeldmanlaw.com		
E-mail address: (to b	oe used for future annual report	notification)
For further information concerning this matter, p	please call:	
Peter Feldman	at (de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Depa	artment of State:
■ \$35 Filing Fee		□\$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 Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECKETARY OF STATE DIVISION OF CORPORATIONS

National Criminal Defense Group, P.A

16 JAN -8 PM 1: 24

National Criminal Defense Group, F.A.	the filed with the Florida Dant of State
P15000087972	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
Law Office of Peter Feldman, P.A.	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered." "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	155 East Blue Heron Blvd
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 300
	West Palm Beach, Fl 33404
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same as above
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
	<u>131-</u>
Name of New Registered Agent	
(Floridae	treet address)
	rreet adaress)
New Registered Office Address:	, Florida (City) (Zip Code)
	(City) (Zip Colle)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				-
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		_		
Add				
Remove				

If 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, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament is the time time the time time to the time to t
	

The date of each amendment(s) a	doption:	Fig. if other than the
date this document was signed.		DIVISION OF CORPORATIONS
Effective date if applicable:		The state of the s
	(no more than 90 days after amendment file date)	16 JAN -8 PM 1: 24
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amend ufficient for approval.	iment(s)
	proved by the shareholders through voting groups. The following are each voting group entitled to vote separately on the amendment(s	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	**	
by	 (voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	der
1/5/2016 Dated		
Signature		
	Hrector, president or other officer - if directors or officers have no	t been
	ed, by an incorporator – if in the hands of a receiver, trustee, or oth	
	ted fiduciary by that fiduciary)	
	Peter Feldman, Esq.	
	(Typed or printed name of person signing)	
	President	
	(Title of person cigning)	