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(Address)					
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JUN 29 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	LATION: Law Of	fire of Mich	ael Schmiz, P.A.				
DOCUMENT NUMB	ER: <u>P1500008</u>	9090					
•	of Amendment and fee are su		`				
Pleasé return all corres	pondence concerning this ma	tter to the following:					
	Tran	(Trisha) Le					
· •	Name of Contact Person						
-		Firm/ Company					
-	401. E. Jack	SON St. , Ste -	2340				
	401 E. Jackson St., St. 2340 Address Tampa / Fl. 3368 2 City/ State and Zip Code						
•		City/ State and Zip Cod	e				
	,	sed for future annual report	notification)				
For further information	concerning this matter, plea	se call:	•				
TRAN (TA	CISHA) LE.	at (720	277-8789				
· Name o	f 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)				
Mailing Address		Street	Address				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Law Office of Michael	1 Schmiz, P.A.		
(Name of Corporation as cu	urrently filed with the Florida Dept. of State)		
P15000089	1090		
(Document Nur	mber of Corporation (if known)	₹4	egize.
Pursuant to the provisions of section 607.1006, Florida Statute	on this Florida Profit Corneration adopts the follow	ning amendme	nt(e) to
ts Articles of Incorporation:	s, this Ptortua Proja Corportation adopts the follow		
•	•	Sin	24
A. If amending name, enter the new name of the corporati	ion:	∰ <u>~</u> €	nger
Le Law Office, P.A.		The new	H
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	," or "Co". A professional corporation name mu	abbreviation st contain the) () (
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1901 E. JACKSON ST. TAMPA, FL 33607		234
	TAMPA, FL 336007		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a			
	(TRISHA) LE		
401E.J	TACKSON ST., SUPTE 2340 TA	MPA, FC	<i>3360</i>
(Flo	orida street address)	·	
New Registered Office Address:	, Florida		
	(City) (Z	Zip Code)	
•			
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		109	
i nerevy accept the appointment as registered agent. I am Jai	танаг жип апа ассері те обиданоть ој те розто	76.	
\mathcal{A}	\sim		
(//-)			
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>	<u>John I</u>	<u>∑oe</u>	
X Remove	<u>v</u>	Mike.	lones	
X Add	<u> </u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	0		Michael Schmiz	4308 Porpoise Dr. Tampe Fl 33617
Add	,			Tanja F1 33617
X Remove		-		
2)Change	\mathcal{D}	. <u></u>	Tran (Trisha) Le	40/ E. Tackson St., Ste 239 Tampa, FL 33602
Add				Janga, FL 33602
Remove				<u> </u>
3) Change				
Add				
Remove				
4) Change		<u>.</u>		
Add	•		,	
Remove				
5) Change		_		
Add				
Remove		•		
6) Change				
Add				
Remove				

amending or adding additional Arti- ttach additional sheets, if necessary).	
	·
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· · · · · · · · · · · · · · · · · · ·	
	
	
	
	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
.000 shares an	ie being exchanged from
(xx xx)	e being exchanged from Wichael Schmiz to the new
ITEMA VITECOUT /	alichael Schmiz to the new
zodor Tran Les	
• .	

The date of each amendment(s) adoption date this document was signed.	n;		, if other than the
Effective date if applicable:	Tuly	2016	
	(no more than 90	20Ug days after amendment file date))
Note: If the date inserted in this block d document's effective date on the Departme		ble statutory filing requirement	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The r t for approval.	number of votes cast for the ame	endment(s)
☐ The amendment(s) was/were approved must be separately provided for each v			
"The number of votes cast for the	amendment(s) was/were	sufficient for approval	
by	(voting group)	,n	•
The amendment(s) was/were adopted by action was not required.	y the board of directors w	rithout shareholder action and s	hareholder
The amendment(s) was/were adopted by action was not required.	y the incorporators witho	ut shareholder action and shareh	nolder
Dated 6/16/	2016	1	
Signature 9712	shell &		
Signature		r - if directors or officers have	not been
selected, by a	n incorporator - if in the	hands of a receiver, trustee, or o	other court
appointed fide	iciary by that fiduciary)		
	Michael Se (Typed or printed no	hmiz	
	(Typed or printed na	ume of person signing)	
	Director		
,	(Title of	person signing)	