## P15000691765

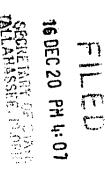
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32314

NAME OF CORPORATION: Nathaniel Craw Grd, DOCUMENT NUMBER: P15000091765  The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Nathaniel Crawford	P.A.
Pompano Beach, FL 330 City/ State and Zip Code	ail-com
For further information concerning this matter, please call:  Name of Contact Person  Area Code & Daytime  Enclosed is a check for the following amount made payable to the Florida Department of State  \$35 Filing Fee  \$43.75 Filing Fee & \$\square\$\$\$43.75 Filing Fee & \$\square\$	e: BEE S
Certificate of Status  Certified Copy (Additional copy is Certified Copy (Additional copy is Certified Copy enclosed)  Mailing Address Amendment Section Division of Corporations P.O. Box 6327  Certified Copy (Additional copy is Certificate (Additional copy is Certificate (Additional copy is Certified Copy enclosed)  Street Address Amendment Section Division of Corporation Clifton Building	Copy al Copy d)

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

to

**Articles of Incorporation** 

Nathaniel Crawford, I	).A.			
(Name of Corporation as currently f	iled with the Florida Dept. of State)			
P15000091765				
(Document Number of C	orporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	orida Profit Corporation adopts the fo	llowing am	endme	ent(s) to
A. If amending name, enter the new name of the corporation:				
Henry N. Crawford, P.F		The	e nev	41
name must be distinguishable and contain the word "corporation,"		the abbrev	viatio	n
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.,	". A professional corporation name	must conta	ain the	8
word trainered, projessional association, of the abbreviation 1.7				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A			
(Francipal Office address MOST BE A STREET ADDRESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA			
(Mauring address MAT DEAT OST OFFICE BOA)				
	<del></del>	<del>B</del> c	<b>G</b> 53	
		A	品	7)
D. If amending the registered agent and/or registered office address	in Florida anter the name of the	3	C 2	Carrier.
new registered agent and/or the new registered office address:	in riorida, enter the name of the	SS	0	) producers
Name of New Registered Agent	1/A	4 6 4 4 1 1 1 4 1 1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	H	# # F
Name of New Registered Agent	*	<del></del>	-:-	teres:
(Florida street	address		9	
	٠ •	. 4,		
New Registered Office Address:	H , Florida, Florida	(Zip Code)		
10,	97	(Lip Cour)		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the pos	ition.		
1				
N/	A			
Signature of New Regi	istered 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 <math>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>	Address
1) Change		N/A	
Add			
Remove		. 1 .	
2) Change	<del></del>	N/A	
Add		1	
Remove			
3) Change		NIA	
Add		ı	
Remove		1	
4) Change		NA	
Add		1	
Remove		1	
5) Change		-N/A	
Add		•	
Remove		1	
6) Change		MA	
Add		1	
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
(Titaen dadinonal sheets, y necessary).	N I II
16	name make afficient and an arrange leading of leaved above
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	N/A.
<del>, , , , , , , , , , , , , , , , , , , </del>	

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this blo document's effective date on the Department.	ock does not meet the applicable statutory filing requirements, this datartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(sicient for approval.	s)
	oved by the shareholders through voting groups. The following stateme ach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholde	ar T
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	12/2016	***
Signature	Notife	
(By a dire	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other cound fiduciary by that fiduciary)	20
777	1/1/ 1/0/ 0/ 1	<b>3 3 1</b>
_	Nathaniel Crawford	
	(Typed or printed name of person signing)	0
_	President	
	(Title of person signing)	