Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : GFB TAX SERVICE LLC

Account Number : I20120000047

Phone Fax Number : (754)246-6160 : (954)510-2072

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: gastonbelen@gfbtaxservice.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN MARA MUCHENIK PA

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Certificate of Status	0
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Estimated Charge	\$35.00

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MARA MUCHENIK PA DOCUMENT NUMBER: P15000098169

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GASTON BELEN

Name of Contact Person

GFB TAX SERVICE LLC

Firm/ Company

2200 N. COMMERCE PARKWAY. SUITE 400

WESTON, FL 33326

City/ State and Zip Code

GASTONBELEN@GFBTAXSERVICE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, picase call:

GASTON BELEN

Area Code & Daytime Telephone Number

Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department 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 Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

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Articles of Amendment Íο

Articles of Incorporation

MARA MUCHENIK PA	M.	ΑF	AF	М	UC	HE	NIK	PA
------------------	----	----	----	---	----	----	-----	----

(Name of Corporation as currently filed with the Florid	ia Dept. of State)
P12000080104	
(Document Number of Corporation (if kno	wn)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) a
A. <u>Hamending name</u> , enter the new name of the corporation: MARA MUCHENIK CENA PA	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", word "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) —	
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	n Florida, enter the name of the
Name of New Registered Agent	
(Florida street ad	idress)
New Registered Office Address: (City)	Florida (Zip Code) 50
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a	- I
Signature of New Registered Ages	if changing

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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;

2456014

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 De	<u>0c</u>	
X Remove	Y	Mike <u>J</u>	शास	
_X Add	<u>sv</u>	Sally S	<u>with</u>	
Type of Action (Check One)	Title		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				

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an amendment provides for an exchange, reclassification, or cancellate rovisions for implementing the amendment if not contained in the amendment applicable, indicate N/A)	
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The date of each amendment(s) ac	option: 01/20/2016
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) efficient for approval.
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	
	(voling group)
nction was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated 01/20	/2016
Signature	164
selected	rector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	MARA MUCHENIK
	(Typed or printed name of person signing)
	PVST
•	(Title of person signing)

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