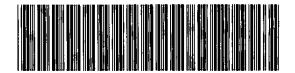


(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	

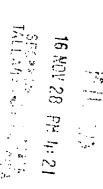
Office Use Only



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NOV 29 2016 R. WHITE





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	Sunshine State Div	orce and Mediation, Inc. di	oa Guided Divorces	
NAME OF CORPORATION: Sunshine State Divorce and Mediation, Inc. dba Guided Divorces DOCUMENT NUMBER: P16000006290				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Barbara Mehl			
		Name of Contact Person	1	
	Sunshine State Divorce and I	Mediation		
		Firm/Company		
	1402 Sunshine Drive			
		Address		
	Jupiter, FL 33458			
		City/ State and Zip Cod	e	
mehl.	barbara@gmail.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Barbara Mehl		at (561	707-5395	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
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)	
Ame	ing Address ndment Section sion of Corporations	Amend	Address ment Section n of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2016

BARBARA MEHL 1402 SUNSHINE DR JUPITER, FL 33458

SUBJECT: SUNSHINE STATE DIVORCE AND MEDIATION, INC.

Ref. Number: P16000006290

We have received your document for SUNSHINE STATE DIVORCE AND MEDIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 416A00023880

MADSEN Alpha

PIEBLE JEE

NOTATION ON FILST

POSE OF Application

11/17/16

www.sunbiz.org

DO DOV 0007 M H 1 H 21 000

FIL WAR

Articles of Amendment to Articles of Incorporation

16 NOV 28 PM 4: 21 SECRETAL VICE CASE TALL MIA SERVICE A

Sunshine State Divorce and Mediation, Inc.

(Name of Corporation as currer	ntly filed with the Florida Dept. of State)
P16000006290	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Sunshine State Divorce and Mediation, P.A. , A / A) Firm The new
name must he distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n/a
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 adnew registered agent and/or the new registered office address	
Name of New Registered Agent	
THE OF THE PROPERTY AND A STATE OF THE PROPERTY AND A STAT	
(Florida :	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ages I hereby accept the appointment as registered agent. I am familia	
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	PT	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>	<u>Addres</u> s
1) Change		n/a	
Add			
Remove			
2) Change			
Add			
Remove			
3)Change		No. of the latest and	
Add			
Remove			
4) Change			
Add			
Remove			
5)Change		<u> </u>	44-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Add			
Remove			
6) Change			
Add			
Demotre			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
n/a 05 Th De Ple Doll Con A En on a
(Attach additional sheets, if necessary). (Be specific) n/a Previously folkly here at the first contain the first cont
•
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
n/a

date this document was signed.	taopuon:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder
October 3	1, 2016
Dated	3 nexe
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	Barbara Mehl
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)