P16000001658

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	ATION: ATHENA SALDA	NHA, P.A.	
DOCUMENT NUMB	ER: P16000007658		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Processing Department		
•		Name of Contact Persor	1
	My Corporation Business Ser	vices, Inc.	
•	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	23586 Calabasas Road, Suite	•	
		Address	
	Calabasas, CA 91302		
		City/ State and Zip Code	•
***	asin a@musamaratian sam		
proces	ssing@mycorporation.com	-1 (- (-)	-atification)
	E-mail address: (to be us	ed for future annual report	nottication)
For further information	concerning this matter, pleas	e call:	
Processing Departmen	nt	at (⁸⁷⁷	de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

ATHENA SALDANHA, P.A.

(Name of Corporati	on as currently filed with the Florida Dept. of State)
P16000007658	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
ATHENA CHILICAS SALDANHA, P.A.	The new
	d "corporation," "company," or "incorporated" or the abbreviation," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS)
	70
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
D. If amonding the project and a set of set	
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:
	I am familiar with and accept the obligations of the position.
Sion	ature 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>oe</u>	
· X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_ .		
Add				
Remove				
2) X Change				
Add				
Remove				
3) Change		<u> </u>		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<u>-</u>			
Add				
Remove				
6) Change				
Add				······································
Remove				

tach additional she	ng additional Art	(Be specific)				
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an amendment pro	nvides for an ercl	nange reclassifi	ration or cancell	otion of iccued	charas	
rovisions for imple	ementing the ame	ndment if not co	intained in the ar	mendment itse	f:	
(if not applicable	e, indicate N/A)					
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			<u></u>			.

	04/04/2016	
The date of each amendment(s) added this document was signed.	adoption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man 50 days after amenament file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date wo	rill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated	20/14 Tenx Chelicas Solelonde	
	director, president or other officer – if threctors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court	
	inted fiduciary by that fiduciary)	
	Athena Saldanha	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	