## P16000019

(Re	equestor's Name)	<del></del>
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nam	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	<u>.                                    </u>	

Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: MOTHUND DOCUMENT NUMBER:	Sells Florida, PA.
The enclosed Articles of Amendment and fee are submitted	ed for filing.
TOSO NO FORTS M TIMOTOOKS 18	The following:  And of Contact Person  Firm Company  Address  Tyl State and Zip Code  A C M A i  Triure annual report notification)
For further information concerning this matter, please cal  Name of Contact Person	at ( <u>339</u> ) <u>1110 · 8213</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payab	ele to the Florida Department of State:
Certificate of Status (	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Additional copy is cnclosed) S52.50 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

Tallahassee, FL 32301

Articles of Am	endment
Articles of Incor	rporation 47.000 12.7410: 23
TIMOTHY SELLS FLO	RIDA, P.A.
(Name of Corporation as currently)	filed with the Florida Dept. of State)
P16000006'1'	9
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	. 1
TIMOTHY M. BI	ROOKS, P.A. The new
name must be distinguishable and contain the word "corporation,	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	
word chartered, projessional association, or the appreciation 1.	DOCA LECTED DOAN
B. Enter new principal office address, if applicable:	1050 WENTER RUMD
(Principal office address MUST BE A STREET ADDRESS)	Caits 109
	FOUT MILED ( ) 3391
	-0KL 1960, TL. 2011
C. Enter new mailing address, if applicable:	TATAL BULLON ONAN
(Mailing address MAY BE A POST OFFICE BOX)	INO WHITE KOND
	'SUITE 109
	EAR MICK 1 22010
	- ORC 119212, TL. 2011
D. If amending the registered agent and/or registered office addres	es in Florida, enter the name of the
new registered agent and/or the new registered office address	is in the load, that the name of the
k//.	A
Name of New Registered Agent	<del>/                                     </del>

New Registered Office Address:

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 position.

Signature of New Registered Agent, if changing

(Florida street address)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change		TERUKO BROOKS	6300 S. Pointe Berd
Add			4423
Remove			Fort Myses, FL. 3391
2) Change		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
Add		•	<del> </del>
Remove		( /n	
3) Change		_ <u> </u>	
Add		,	
Remove		/	
4) Change		N/A	
Add			
Remove		/	
5) Change		N/A	
Add		· ·	
Remove		1	
6) Change		<u> N/A</u>	
Add		·	
Remove			

amending or adding attach additional shee	s, if necessary). (Be specific)
	( .
	- 1 KM
	- V - V - V - V - V - V - V - V - V - V
	1'
<del></del>	
an amendment pro	ides for an exchange, reclassification, or cancellation of issued shares,
rovisions for implei	nenting the amendment if not contained in the amendment itself:
(if not applicable	indicate N/A)
	•
	114
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·	1 1

The date of each amendment(s) adoption: F2B. 9. 90/11 if other than the
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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"  (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature  (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator — If in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(I) Q OTHER I +