P1600015699

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300299357123

05/23/17--01008--005 **35.00

17 JUN -6 AMIL: 55

Ound/ Name Change

JUN - 6 2017

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: SUM	4 HOMES IN		
DOCUMENT NUMB	er: <u> </u>	00015699		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
-		Name of Contact Person		
-	ADVAN	Firm/Company	1 spevice	
-	12534	WILES POA	D	
-	CORALS	PRINGS, PL City/ State and Zip Co.	_ 33076 de	17 J
			T notification)	17 JUN -6 AMII: 55
For further information	concerning this matter, pleas	se call:		AHII: 55
PAREIUA POLLARI at (954) 255-3848 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment 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		Amen Divisi	t Address dment Section on of Corporations n Building	

2661 Executive Center Circle

Tallahassee, FL 32301

SEGNETARY OF STATE

FAXCOVER SHEET

Advance Financial Service 12534 Wiles Road Coral Springs, FL 33067 (954)255-3848 phone (866) 936-1580 fax

Date: 6/6/2017

ATTENTION: DIANE CUSHING, AMENDMENT SECTION, DIVISION OF CORPORATIONS

RE: SUMA HOMES INC NAME CHANGE TO RYAN BALRAM PA

DOCUMENT NUMBER: W17000046261

SUMA HOMES DOCUMENT NUMBER: P 16000015699

NUMBER OF PAGES: 6 INCLUDING COVER

FAX: (850) 245-6897

Good morning Diane:

Please find attached corrected page 3 providing the specific business purpose of the corporation.

Thank you for your assistance in this matter.

Sincerely,

Patricia Pollari

Accountant



June 1, 2017

PATRICIA POLLARI ADVANCE FINANCIAL SERVICE 12534 WILES ROAD CORAL SPRINGS, FL 33076

SUBJECT: SUMA HOMES, INC. Ref. Number: P16000015699

We have received your document for SUMA HOMES, 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):

The specific business purpose of the professional association must be stated in the document.

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.

Letter Number: 217A00010993

Diane Cushing Senior Section Administrator

www.sunbiz.org

Articles of Incorporation of

SUMA HOMES INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P.16000015699	·
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
RYAN BALRAM 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.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	~
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	NH TEST
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	. アゲ 3 計
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	S IN A TOTAGE, CHICA CHE HERE OF CITE
Name of Nam Pagistanad Again	11/
Name of New Registered Agent	W 18
(Florida street	address)
New Registered Office Address:	, Florida
\sim	ily (Zip Code)
`	
N. D. C. J. D. D. C. J. D. D. C. J. D. C. J. D. D. D. D. D. D. J. D.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
·	
	$\mathcal{N}\mathcal{D}$
	` \1
Signature of New Reg	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 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: \underline{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>	<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		<u> </u>	
Add			
Remove			

ANT	AND	ML	ICEAL	ESTATE	ACTIVITY	
			· ··		<u> </u>	
						
		·=···	<u></u>			
						
			-			
						
				·		
			 · –			<u></u>
						
		<u>.</u>	· _			
						<u>.</u>
	* *****				-	м
ns for imp	<u>lementing t</u>	ne amendm	e, reclassificate ent if not con	tion, or cancella tained in the am	tion of issued shares, endment itself:	
ot applicab	ole, indicate	N/A)				
		***			/ -	
			<u> </u>			
				X		
				////		
			4	1/		

The date of each amendment(s) adoption:	if other than the
uste his document was signed.	
Effective date if applicable:	
(no more than 90 days after am	endment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
The aniendment(s) was/were approved by the shareholders through voting gro must be separately provided for each voting group entitled to vote separately	ups. The following statement on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting group)	
The amendment(s) was/were adopted by the board of directors without sharehaction was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	raction and shareholder
Dated X 5 18 17 Signature X Palm	
, 72/	
Signature X	
(By a director, president or other officer – if director, selected, by an incorporator – if in the hands of a rec	
appointed fiduciary by that fiduciary)	civer, a distanção i oriel com t
RYAN BALRAM	L
(Typed or printed name of person	signing)
	PRESIDENT
(Title of person signit	íg)