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COVER LETTER

TO: Amendment Section Division of Corporations Rick Zabielinski PA NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Larry Serur Name of Contact Person Larry Scrur CPA PA Firm/ Company 7431-34 West Atlantic Ave Suite 148 Address Delray Beach Fl 33446 City/ State and Zip Code Larry@larryserurepa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Larry Serur Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Fifing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassec, FL 32301

16 M/2 / PM/2: 10

Articles of Amendment to Articles of Incorporation of

So NO 2 PAR 10 Rick Zabielinski PA (Name of Corporation as currently filed with the Florida Dept. of State) 1/16000041799 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Ricky Zabielinski PA name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code)

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

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:

 $P \sim President$; $V \sim Vice President$; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive 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 leave's 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: <u>X</u> Change	PT	John Doe	:		
X Remove	<u>v</u>	Mike Jones			
\underline{X} Add	<u>sv</u>	Sally Sm	<u>ith</u>		
Type of Action (Check One)	Title	:	Name	Address	
1) Change					
Add				WHICH THE PARTY OF	
Remove					
2) Change			***************************************		
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Attach ac	ng or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)	
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lf an am provisit (if)	ndment provides for an exchange, reclassification, or cancellation of issued share as for implementing the amendment if not contained in the amendment itself: or applicable, indicate N/A)	ž.

The date of each amendment(s) adoption:	, 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 requirement document's effective date on the Department of State's records.	s, 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 votes east for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and staction was not required.	nareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	nolder
Dated X 11/18/16	
Signature Manual	
(By a director, president or other officer - if directors or officers have	
selected, by an incorporator — if in the hands of a receiver, trustee, or o appointed fiduciary by that fiduciary)	ther court
× 0 1 -7 1 1	
- Nicky Cabielinski	
(Typed or printed name of person signing)	
Y President	
(Title of person signing)	

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