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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LQW U	Hice of truspeyer Beg, P.A
DOCUMENT NUMBER: PLODOC)57034
The enclosed Articles of Amendment and fee are so	ubmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Erin To Be 2075 Mc Sarasota erin @ Sper E-mail address: (to be u	Name of Contact Person Amended Firm/ Company Drin Street, Suite 28 Address Florida 34237 City/ State and Zip Code Sell for future annual report notification)
For further information concerning this matter, plea	se call:
Eric Speyer Name of Contact Person Enclosed is a check for the following amount made	at (941), 893–7598 Area Code & Daytime Telephone Number
S35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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 Amendment

to

Articles of Incorporation

of

Law Office of Enr	Speyer Berg, PA.
(Name of Corporation as current)	v filed with the Florida Dept. of State
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: LOW Office of Ervenume must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation"	Co" 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>)	2075 Main Street Suite 28
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Sarasota, FL 34237 Same as above 7
D. If amending the registered agent and/or registered office addraw registered agent and/or the new registered office address Name of New Registered Agent 2075 (Florida str.)	Peyer Pain Street, Suite 28 ectadoressi
New Registered Office Address: Sarasota	7 (Cliy) - Florida <u>34237</u> (Cliy) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. Fam familiar y Signature of New R	egistered Agent, if changing G

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: XChange	<u>PT</u>	John De	<u>oe</u>	N/A	
X Remove	\underline{V}	Mike Jo	<u>mes</u>	,	
X Add	<u>sv</u>	Sally Si	nith		
Type of Action (Check One)	Title		<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					
Add		_			
Remove					

E. <u>If amending</u> (Attach <i>addit</i> .	o <mark>r adding add</mark> ional sheets, if i	itional Article	s, enter chang Be specific)	<u>e(s) here</u> :			
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F. If an amenda provisions f	ment provides for implementi	<u>for an exchang</u> ng the amendi	ge, reclassifica nent if not con	<u>ition, or cance</u> itained in the	<u>llation of issue</u> amendment its	<u>d shares,</u> elf:	
(if not a	ipplicable, indic	rate N/A)		Tallied to the	<u>angerialite ite</u>	<u> </u>	
1	N/A						
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The date of each amendment(s) adoption: December 20, 2018. if other than the date this document was signed.
Effective date if applicable: December 20, 2018 (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)
☐ 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.
Dated
(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)
Erin Speyer (Typed or printed name of person signing)
President
(Title of person signing)