P16000075297

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Corpora			
NAME OF CORPORA	TION: COTO	LAW GROUP	P.A.
DOCUMENT NUMBE	r:P1600	00075297	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	ر <i>لو</i> ک	VATHAN J.	Сого
		Name of Contact Perso	n
_	· ····	Firm/ Company	
_	5975 5	Address	, SUITE GOY
_	Sayty	MEANI, FL City/ State and Zip Cod	<u>33143</u>
		HAN COTO QGM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
JONATHAN	J. Coto	at (_ 3 0\$_	345-7692
Name of	Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Dep	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)
Amend	g Address Iment Section on of Corporations	Amend	Address Iment Section on of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)

P160000 75 297
(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

C'OTO	LAW FIRM P.	The or "incorporated" or the abbrevia
ne must be distinguishable and contain the orp.," "Inc.," or Co.," or the designation "C d "chartered," "professional association," of	Corp," "Inc," or "Co". A professi	or "incorporated" or the abbrevia onal corporation name must contain
Enter new principal <u>office address, if applic</u> incipal office address <u>MUST BE A STREET</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	(BOX) N/A	
If amending the registered agent and/or reg new registered agent and/or the new registe	red office address:	
Name of New Registered Agent	N/T	<u> </u>
	(Florida street address)	
New Registered Office Address:		, Florida(Zip Code)
		, Florida(Zip Code)
	(City) Registered Agent:	, Florida (Zip Code)

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> <u>Johr</u>	Doe		
X Remove	<u>V</u> <u>Mik</u>	e Jones		
X Add	SV Sally	y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Mr Change	NA	N/A	N/&	
Add		·	,	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove			·	
4) Change				
Add				
Remove				
5) Change				
Add			\$P\$	
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Re specific)
MARKATA	
West Market and the Control of the C	
· · · · · · · · · · · · · · · · · · ·	
Made 10 To 10	
F. If an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
1	
	·····

The date of each amendment(s) at date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated <i>FEBRU</i>	ARY 07, 2017	
Signature		
(By ardi	rector, president of other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	JONATHAN J. COTO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	