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SECRETARY OF STATE
TAIL A HASSEE EN

COVER LETTER

TO: Amendment Section Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

NAME OF CORPO	ORATION: Angela K Moulton	ı, P.A.			
	1BER:		<u> </u>		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Angels K McWilliams				
		Name of Contact Person	1		
		Firm/ Company			
	648 CYPRESS RD				
		Address			
	VENICE, FLORIDA 34293				
	City/ State and Zip Code				
	angelakmewilliams@gmail.c	om			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Angela K McWilliams		at (408-3385		
Name	e of Contact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:		
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		

Street Address

Amendment Section

Division of Corporations

The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

FILED

Angela K Moulton, P.A.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

2022 FEB 15 AM 8: 16

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE P16000085551 TALLAHASSEE, FL (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: Angela K McWilliams, P.A. 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." SAME B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: SAME (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: Angela K McWilliams Name of New Registered Agent 648 Cypress Rd. Venice, FL 34293 (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doc				
X Remove	\underline{V}	Mike Jones				
<u>X</u> Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) X Change	P	Angela K Moulton				
Add						
Remove						
2) Change	<u>р</u>	Angela K McWilliams				
X Add						
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add		-				
Remove						
6) Change						
Add						
Remove						

1 amenuing or adding	g additional Art	icles, enter chang	<u>e(s) here</u> :			
Attach additional shee.	ts, if necessary).	(Be specific)				
				<u> </u>		
						
		_				
						
				_		
f an amendment pro	vides for an exc	hange, reclassific:	ation, or cancell	ation of issued sha	ires,	
provisions for imple (if not applicable	menting the amo	endment if not co	ntained in the a	mendment itself:		
(if not applicable	indicate N/A)					
						<u> </u>
_						
					<u> </u>	-

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: Iramediately	
Effective date if applicable: Iramediately (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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
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) (Typed or printed name of person signing) RELA K MOWLU AMS (Typed or printed name of person signing)	<u>PN</u>
(Title of person signing)	