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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GERRY SCANLO	N PA				
	ER:					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
,	GERRY SCANLON					
-		Name of Contact Persor	1			
	SCANLON & METRO, P.A					
-		Firm/ Company				
	1816 N DIXIE HIGHWAY, STE A5					
-		Address				
	FORTI AHDERDALE EL					
· -	FORT LAUDERDALE, FL. 33305					
		City/ State and Zip Code	2			
GERR	YSCANLON@GMAIL.CO	М				
·	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
GERRY SCANLON		954 at (7670102			
Name o	f Contact Person	Area Code & Daytime Telephone Numb				
re at a letter to attach	a cu :	11 - 1 - 12 - 13 - 15				
nnciosed is a check for	the following amount made	payable to the Plotida Depa	irtment of State;			
S35 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		Street Address				
	ndment Section	Amendment Section				
	ion of Corporations	Division of Corporations				
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2019 FEB 19 AM 10: 14

(Name of Corporation as current)	v filed with the Florida Dept. of State) 118 ; OF STATE
GERRY SCANLON P.A (P16000090260)	DELUAHAS SEE, FL
(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) t
A. If amending name, enter the new name of the corporation:	
SCANLON & METRO, P.A	The new
name 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 "	n," "company," or "incorporated" 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>)	
C. Enter new mailing address, if applicable:	
(Muiling address <u>MAY BE A POST OFFICE BOX</u>)	
 If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address 	
Name of New Registered Agent	
Name of New Registered Agent	
(Florida str	ver riddenss
New Registered Office Address:	(Cin) (Zip Code)
	(Lip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Signature of New R	egistered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 i. 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.

X Change	<u>PT</u>	John D	<u>oc</u>	
X Remove	Y	Mike Jo	ones	
X Add	\underline{SV}	Sally S	mith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<u>-</u>		
Add				
Remove				
б) Change				
Add	 	_		
Remove				

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	·			
					
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···					
If an amendment provides for an exch	nange, reclassifica	ation, or cancella	tion of issued sh	nares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment it not cor	<u>itained in the ani</u>	endment itself:		

The date of each amendment(s) :	rdoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		· · · · · · · · · · · · · · · · · · ·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date department of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	t
"The number of votes eas	it for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
2/12/2019 Dated) 	
Signature	-cl	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	GERRY SCANLON	
	(Typed or printed name of person signing)	
	MANAGER	
	(Title of person signing)	