## P17000000283

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SECRETARY OF STATE
SECRETARY SEE, FLORIDA

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JOSEFA M. PERE	Z-SANCHIS P.A.	
DOCUMENT NUM	BER: P17000000283		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Mariajose Perez-Sanchis		
		Name of Contact Persor	1
	JOSEFA M. PEREZ-SANCE	HS P.A.	
		Firm/ Company	
	5514 Buchanan dr		
		Address	
	Fort Pierce Fl 34982		
		City' State and Zip Cod	· · · · · · · · · · · · · · · · · · ·
	josie@jperezsanchispa.com		
		sed for future annual report	notification)
For further informatic	on concerning this matter, plea		7735343
Name	of Contact Person	at ( 954 ) 7735343  Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

JOSEFA M. PEREZ-SANCHIS P.A.			
(Name o	of Corporation as curren	tly filed with the Florida Dept. of St	<u>ute</u> )
P1700000283			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts t	he following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
MARIAJOSE PEREZ-SANCHIS P.A.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation name n	abbreviation "Corp.," nust contain the word
B. Enter new principal office address, if applicable:		2445 NE HICKORY AVE	2
(Principal office address <u>MUST BE A S</u>		JENSEN BEACH ,FL 34957	APR T
			29
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		5514 BUCHANAN DR	ESP Z
		FORT PIERCE FL 34982	ORBO
D. If amending the registered agent at new registered agent and/or the new New registered agent and/or the new registered agent and/or the new registered agent and/or the new registered agent at the		<u>88:</u>	the
<u>Name of New Registered Agent</u>	2445 NE HICHORY AV	TE	<del></del>
		street address)	
N	JENSEN BEACH	. Flor	34957
New Registered Office Address:		(Cay)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis	thanging Registered Age tered agent. I am familia	nt: v in and a cept the obligations of th	ve position.
	(		
	Signature of Acce	Postered Agent, if changing	
Check if applicable  The amendment(s) is/are being filed p	oursuant to s. 607.0120 (1	/ I) (e). F.S.	

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	$\underline{V}$	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
Y Change	PT		MARIJOSE PEREZ-SANCHIS	2445 NE HICKORY AVE
Add		_		JENSEN BEACH , FL 34957
Remove				
2) Change	-			
Add				
Remove 3 ) Remove				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6)Change				
Add				
Remove				

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
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			0.2 62 1.3		
	tes for an exchange, re	classification, or car	cellation of issued share	<u>:S.</u>	
ii an amengment provid	enting the amendment	il not contained in ti	<u>ie amendment itseit:</u>		
provisions for impleme	activate MATA				
provisions for impleme (if not applicable, i	augue 1021)				
provisions for impleme	aucut (on)				
provisions_for impleme					
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provisions for impleme					
provisions for impleme	ancare (1721)				
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	s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment jile date)	
	is block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amenda re-sufficient for approval.	Em(s)
	approved by the shareholders through voting groups. The following sta- for each voting group entitled to vote separately on the amendment(s).	nement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by MARIAJOSE PER	EZ-SANCHIS	
U	EZ-SANCHIS	
04/18/2 Dated		
Signature		
(By selv	a director, president or other officer - A directors or officers have not be ected, by an incorporator - if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	MARIAJOSE PEREZ-SANCHIS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	



## Petition for Name Change

USC15 Form N-662

Department of Homeland Security U.S. Civizenship and Immigration Services

		Name of Cour				
		United States	District Co	urt		
	<u> </u>	701-Clema Vest-Ralm-Bea				
Information About	Vain(Petitioner)#	THE P	15	- <b>- 1</b>		
As part of the naturalization pr	ocess, you have the oppo-	tunity to legally ch	ange your name	2. Please complete It	em Number lines 1 8.	
Type or print clearly.)						
I. Full and Correct Name (C		le Name		Family Name (Last N	ame)	
Given Name (First Name) JOSEFA	MAR			PEREZ SANCHIS		
2. Mailing Address						
Street Number and Name				State	ZIP Code	
5514 BUCHANAN DR	FORT PIER	ICE		<u>Fl</u>	34982-7420	
3. Country of Citizenship or	Nationality 4,	Date of Birth (m	n/dd yyyy)		m Number (A-Number)	
Venezuela		12/01/1960		A-075857878		
6. Teenify that I am not enforcement.	seeking a change of name	e for any unlawful p	urpose such as	the avoidance of Geb	Of Crasion of Pin	
7. I petition the court to char				Last Name		
First Name MARIAJOSE	21100	le Name		PEREZ-SANCHIS		
8. Signature and Date				· ·		
Signature of Petition (Use	your current name)	1/9-	)	Date	(mm dd yyyy)	
	<i>x</i>	4			APR 1 0 2019	
Certification of Nai	Sie Change	त्वातयः हर्षन्यः	11 8 11 11 15 1			
Gettification of Mai	ue animige	L. Herrich L. F. Leb.	<u> </u>	<u>. 32                                   </u>	· • · · · · · · · · · · · · · · · · · ·	
I certify that the above petition	n was granted by the cour	t on this date,	IIIN U 7 20	<del></del> -		
	Nobl	e a	(mnvdd/yyy		R	
Signature of Clerk	Angela E. Nobl	Sign	isture of Deput	y Clerk	Jon -	
Important Informa	ARRIGIETE ST.		116-146 M. 16	THE HEAT CALL	0:	
Your cupy of this petition, alo		2.1 <b>1</b> 14 92.3.1 1 1 1 1	<u>3(1) 1 10 61 20</u> bish yan wili n	coive poon (at ion the		
will verify that you elected to	change your name. Your	Certificate of Natu	alization bears	your new name as ch	anged per order of the	
court.						
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	<u></u>	1	<del>- ' : - : :</del>	<u> </u>	·	
Form N-662 05/20/16	, ,	, !				
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