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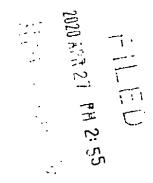
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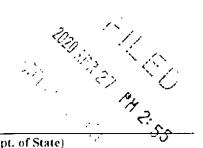
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JESSICA TORRE	S VALENTIN, P.A.	
DOCUMENT NUM	BER: P17000054658		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	Thomas M. Tarsia, Esq.		
	· · · · ·	Name of Contact Person	
	Jones, Haber & Rollings		
		Firm/ Company	
	1633 SE 47th Terrace	, ,	
		Address	
	Cape Coral, FL 33904		
		City/ State and Zip Code	
	tarsia@joneshaberlaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	co colle	
ror mimer informatio	n concerning this matter, piea	se can,	
Thomas M. Tarsia, Esq.		at (²³⁹) 542-0700
Name	of Contact Person		le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amendi Division The Ce	Address ment Section n of Corporations entre of Tallahassee 1. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



JESSICA TORRES VALENTIN, P.A.

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P17000054658	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
JESSICA ZOE OZUNA TORRES, P.A.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	4218 NE 22nd Avenue
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Cape Coral, FL 33909
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4218 NE 22nd Avenue
(10000000000000000000000000000000000000	Cape Coral, FL 33909
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida si	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of New 1	Registered Agent, if changing
Check if applicable	

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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)

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	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sy</u>	Sally St	mith_	
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				

ttach <i>additional sheets</i> ,	dditional Articles, enter change(s) here: if necessary). (Be specific)
	<u> </u>
	
	
 	
	
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an amendment provi	es for an exchange, reclassification, or cancellation of issued shares,
rovisions for impleme	nting the amendment if not contained in the amendment itself:
(if not applicable, i	dicate N/A)
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The date of each amendment(s):	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(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, 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.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
☐ The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through voting groups. The following surreach voting group entitled to vote separately on the amendment(s):	uement
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	, , , , , , , , , , , , , , , , , , , ,	
	(voting group)	
select	23/2020 director, president or other officer - if directors or officers have not be ed, by an incorporator - if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	
	Jessica Zoe Ozuna Torres	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	