

P 170000 54883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

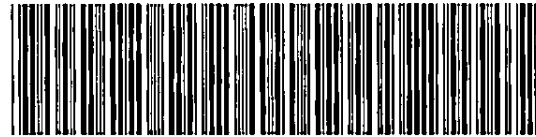
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke with Mr. D. Schwartz
on 7/28/17 to Approved changing
original corp name to current
name.

25

Office Use Only



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JUL 28 2017

Amend r
N/C

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17 JUL 24 PM 1:49
CLERK OF SUPERIOR
COURT
TALLAHASSEE FLORIDA

Warner & Schwartz
Certified Public Accountants & Consultants

July 28, 2017

As the Managing Member of Warner & Schwartz, CPA, PLLC, I fully authorize use of the name to be used for the related entity Warner & Schwartz, CPA, PA. Both companies have common ownership.

Thank you,



David M. Schwartz, CPA

Phone: (561) 686-8666

Fax: (561) 686-3304

1897 Palm Beach Lakes Blvd, Suite 226

West Palm Beach, FL 33409

www.warnerschwartz.com

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DAVID M. SCHWARTZ, CPA, PA

DOCUMENT NUMBER: P17000054883

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID SCHWARTZ
Name of Contact Person
WARNER & SCHWARTZ, CPA, PA
Firm/ Company
1897 PALM BEACH LAKES BLVD., SUITE 226
Address
WEST PALM BEACH, FL 33409
City/ State and Zip Code

dschwartz1978@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID SCHWARTZ at (561) 686-8666
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

WARNER AND SCHWARTZ, P.A.

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

P17000054883

(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:

WARNER & SCHWARTZ, CPA, PA

✓ The new 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."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1897 PALM BEACH LAKES BLVD., SUITE 226

WEST PALM BEACH, FL 33409

C. Enter new mailing address, if applicable:

(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:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____ Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

F. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

[illegible]

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

JULY 15, 2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

JULY 15, 2017

Effective date if applicable: _____
(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____,"
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 7/17/17

Signature 

(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)

DAVID SCHWARTZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)