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A. RAMSEY APR 102024

APP - ,2024

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LAW OFFICE OF	EDWARD J. REYES, P.A			
DOCUMENT NUM	P17000076065				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	EDWARD REYES				
		Name of Contact Person	1		
	LAW OFFICE OF EDWARD J. REYES, P.A.				
		Firm/ Company			
	4730 N. Habana Ave. Suite 201				
	· · · ·	Address	 		
	TAMPA FL 33614				
		City/ State and Zip Cod	e		
	EDWARD@THEREYESFI	RM.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
EDWARD REYES			967329.1		
	e of Contact Person	at (<u>813</u>	de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:		
S35 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)		
Mailing Address		Street Address			
	nendment Section	Amendment Section			
	vision of Corporations O. Box 6327	Division of Corporations The Centre of Tallahassee			
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

LAW OFFICE OF EDWARD J. REYES, P.A.

2024 MAR 19 AM 8: 55

(Name of Corporation	as currently filed with the Fl	orida Dept. of State STATE
P17000076065		The MASSEF FOORIG
(Documen	nt Number of Corporation (if kr	lown)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Cor	noration adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	ooration:	
THE REYES FIRM CORP.		The new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc." o "chartered," "professional association," or the abbrevia	or "Co". A professional cor	orporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	ESS)	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered	Laffice address in Florida, en	tor the name of the
new registered agent and/or the new registered off		ter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
Territoria office radio cos.	(City)	(Zip Code)
Non-Designated Association Community of the series Design	and Ament.	
New Registered Agent's Signature, if changing Regist- I hereby accept the appointment as registered agent. I a		obligations of the position.
Signatu	re of New Registered Agent, if	changing
	and the second s	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607	7.0120 (11) (e), F.S.	
NA THE PROPERTY OF THE PROPERT	N / N /:	

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>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				<u> </u>
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

xuach aaamonai si	ling additional Art heets, if necessary).	(Be specific)				
.,					- 1	
				<u> </u>		
	<u>-</u>		•			
						
	-	<u> </u>	·, ·		_	
an amendment p	rovides for an exc	hange, reclassific	cation, or cancell	ation of issued sh	ares,	
orovisions for imp	olementing the amoble, indicate N/A)	endment if not co	ontained in the a	mendment itself:		
(η ποι αργιτέα	ne, marcate (will)					
<u>.</u>		<u> </u>				
					-	

The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	04/01/2024	
Effective date <u>it applicable</u> .	(no more than 90 days after amendment file	e datc)
	this block does not meet the applicable statutory filing requir he Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without s	shareholder action and shareholder
	re adopted by the shareholders. The number of votes cast for t ere sufficient for approval.	he amendment(s)
	re approved by the shareholders through voting groups. The faced for each voting group entitled to vote separately on the ame	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
bv		
•	(voting group)	
Dated	3/11/24	
Signature _	grand the same of	
	y a director, president or other officer - if directors or officers	have not been
	elected, by an incorporator - if in the hands of a receiver, truste	
а	ppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Presiden +	
	(Title of person signing)	