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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Lois & Clark PA			
DOCUMENT NUN	D17000078500			
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:		
	Lois Lane			
		Name of Contact Person	n	
		Firm/ Company		
	2960 SE 36th Lane			
	Ocala, FL 34471			
		City/ State and Zip Cod	c	
	loislanedecca@gmail.com			
		sed for future annual report	notification)	
For further informati Lois Lane	on concerning this matter, plea	se call:	789-4516	
		de & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ois & Clark PA		
(Name of Corporation as current	ly filed with the Florida Dept. of State)	·-
17000078599		
(Document Number of	of Corporation (if known)	-
arsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the followin	g amendment(s
If amending name, enter the new name of the corporation:		
ouise Lane PA		The new
ime must be distinguishable and contain the word "corporation," ' lnc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain	on "Corp.,"
Enter new principal office address, if applicable:	N/A	
rincipal office address <u>MUST BE A STREET ADDRESS</u>)		
		
Enter new mailing address, if applicable:	>:/.	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
If amending the registered agent and/or registered office add		
new registered agent and/or the new registered office addres	<u>s:</u>	
Name of New Registered Agent N/A		_
(Florida st	reet address)	_
New Registered Office Address:	. Florida	
	(City) (Zip (Codey
w Registered Agent's Signature, if changing Registered Agen		
ereby accept the appointment as registered agent. I am familiar	wan and accept the obligations of the position.	12
		<u>.</u>
<u></u>		ιö .
Signature of New I	Registered Agent, if changing	်လ ယ

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)

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	_
	,
	
	p
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)	
N/A	

The date of each amendment(s) a date this document was signed.	doption;	, if other than the
Effective date <u>if applicable</u> :		
<u></u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date we epartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were addaction was not required.	opted by the incorporators, or board of directors without shareholder action ar	nd shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
06/07/21		7021 JUL 12
Dated		<u> </u>
Signature	Jam Kare	~
(By a G	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	P
	ted fiduciary by that fiduciary)	23
	Louise Lane	ယ ယ
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	