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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TON:	-GRIGALIUNAS, P.A.	
DOCUMENT NUMBER			
The enclosed Articles of z		bmitted for filing.	
Please return all correspor	idence concerning this ma	tter to the following:	
lOt	IN V. MOORE-GRIGAL	IUNAS	
		Name of Contact Persor	1
		Firm/ Company	
P.C	), BOX 360475		
ME	LBOURNE, FLORIDA 3	Address 32936	
		City/ State and Zip Code	:
JOHNVA	400RE.ESQ@GMAIL.C	OM	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se cult:	
JOHN V. MOORE-GRIGALIUNAS		at ( 321	) 288-8902 de & Daytime Telephone Number
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	irtment of State:
S35 Filling 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)
Amendr Divisior P.O. Bo	Address nent Section of Corporations x 6327 see. FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Accutive Center Circle

BIT HOW THE BOOK

## Articles of Amendment to Articles of Incorporation of



JOHN V. MOORE-GRIGALIUNAS A. A.

(Name of Corporation as current	tly filed with the Florida Dept. of State)	47
P17000083640		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the following amenda	nent(s)
A. If amending name, enter the new name of the corporation:		
THE LAW OFFICE OF JOHN VERNON MOORE, P.A.		
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain t	2/1
	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		-
, in the state of		
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>		
		•
D. If amending the registered agent and/or registered office add		
new registered agent and/or the new registered office addres	<u> </u>	
Name of New Registered Agent N/A		
tFlorida si	treet address)	
N/A	treet address)	
tFlorida si New Registered Office Address:	reet address), Florida (Citv) (Zip Code)	

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; F = 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.

Example: <u>X</u> Change	<u>PT</u> <u>John</u>	n Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	NIA	N/A	NIA
Add		·	
Remove			
2) Change			
Add			
Remove			
3.) Change		No. of the last of	
Add			
Remove			
4) Change			
Add			
Remove			
en en			
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	
	_
	_
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)	
NIA	

The date of each amendment(s) adoption:	N/9	, it other than the
date this document was signed.  Effective date if applicable:	N/A (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date w of State's records.	vill not be listed as the
Adoption of Amendment(s) (Q	CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes east for the amendment(s) or approval.	
	the shareholders through voting groups. The following statementing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by	WANTAN APARTY	
, ,	voling group)	
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder action and shareholder	
11/01/2017		
Signature	resident or other officer – if directors or officers have not been	
selected, by an in	ry by that fiduciary)	
JOHN V.	MOORE-GRIGALIUNAS	
<del></del>	(Typed or printed name of person signing)	
PRESIDE	ENT, DIRECTOR	

(Title of person signing)