P17000090564

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COVER LETTER

SIVISION OF CORPORATIONS

TO: Amendment Section Division of Corporations

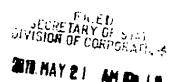
Tallahassee, FL 32314

NAME OF CORPOR	RATION: Shirtean Renca Ta	ylor PA (original name Rer	nea Taylor PA)
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Shirlean Renea Taylor		
	Shirlean Renea Taylor PA	Name of Contact Persor	1
		Firm/ Company	
	2426 Burns Drive		
	-	Address	
	Middleburg, FL 32068		
		City/ State and Zip Code	:
renea	@kw.com		
	•	sed for future annual report	notification)
		•	,
For further information	n concerning this matter, pleas	se call:	
Shirlean Renea Taylor	r	at () 472-8821
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	the following amount made p	payable to the Florida Depa	atment 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)
Amo Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section on of Corporations Building

2661 Executive Center Circle

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of



Renea Taylor PA (Name of Corporation as currently filed with the Florida Dept. of State) P17000090564 (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: Shirlean Renea Taylor PA 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." 2426 Burns Dr B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Middleburg, FL 32068 C. Enter new mailing address, if applicable: 2426 Burns Dr (Mailing address MAY BE A POST OFFICE BOX) Middleburg, FL 32068 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: (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

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	PT John	Doe	
X Remove	V Mike	Jones	
<u>X</u> Add	SV 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			

	(Be specific)
/A	
	
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(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares. Industry if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

May 15, 2018 The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
(voling 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 5/17/18	
Signature Shirla Sun Sul	
(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)	
Shirlean Renea Taylor	
(Typed or printed name of person signing)	 _
President	
(Title of person signing)	