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S. YOURS

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Kevin L	eonardo Mejia P.A.
NAME OF CORPORATION: Kevin L DOCUMENT NUMBER: P1700	0101541
The enclosed Articles of Amendment and fee a	are submitted for tiling.
Please return all correspondence concerning th	is matter to the following:
	Name of Contact Person Gles. C.P.A. P.A. Firm/ Company S. Road St. te 500 Address FL 33431 City/ State and Zip Code be used for future annual report notification)
E-mail address: (to	
•	at (954) 510 -0109 Area Code & Daytime Telephone Number
	nade payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee Certificate of Sta	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

1/ · 1 · / Mar. 2	01 A		
hevin Leongrala Meyia, i.	.A., on as currently filed with the Florida Dept. of State		
(Name of Corporate	on as currently fried with the Florida 17ept. of State	,	
(Docum	ment Number of Corporation (if known)		
(170Cum	tell remote of corporation (it known)		
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the f	ollowing amendi	ment(s) to
A. If amending name, enter the new name of the co	rporation:		
Kevin Leonardo Meija Mei	iic Pa	The no	GW.
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the designation or the designation of the designatio	d "corporation," "company," or "incorporated" of "Inc," or "Co". A professional corporation name	r the abbreviati	on
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			_
			-
		<u> 64,</u>	•
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	<u> </u>	<u> </u>
	•	26 55E	[]
		7 2	Ö
			-
D. If amending the registered agent and/or register	ed office address in Florida, enter the name of the	E 5	
new registered agent and/or the new registered		> •	
Name of New Registered Agent	_		
	(Florida street address)		
N. Davidson J. Odbar A. Hanna	, Florida,		
New Registered Office Address:	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi			
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the po	sition.	
Signe	ature 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.

Example: X Change	<u>PT</u>	John Do	<u>ne</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	mth	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
				
5) Change	-			
Add				
Remove				
6) Change		_		
Add				
Damovo				

Attach additional sheets, if necessary). (Be specific)	
	
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f an amendment provides for an exchange, reclassification, or cancellation of issue	ed shares
provisions for implementing the amendment if not contained in the amendment it	self:
(if not applicable, indicate N/A)	
(y mor approximation, manage many	
	-

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date	<i>)</i>
Note: If the date inserted in this block does not meet the applicable statutory filing requiremen document's effective date on the Department of State's records.	ts, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amby the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(votalg group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required.	hareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	holder
Dated 3 17/2018	
Signature Mc L. Myber Ald	
(By a director, president or other officer – if directors or officers have	
selected, by an incorporator – if in the hands of a receiver, trustee, or	other court
appointed fiduciary by that fiduciary)	
Mork I. Trapes C. ? A (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
marchant	
Theorporater (Title of person signing)	

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