

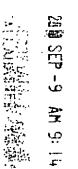
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COVER LETTER

TO: Amendment Section

Division of Corporations Ken Jorgensen P.A. DOCUMENT NUMBER: P1800000 864 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: homas DR. Panama CH Beach, FL. 32408 City/State and Zin Code Jungensen 180 @ GMAK. com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Ken Jorgensen P.A. (Name of Corporation as currently filed with the Florida Dept. of State)	52
(Name of Corporation as currently filed with the Florida Dept. of State).	
P18000000 864	高 6
(Document Number of Corporation (if known)	1867. O
	14 m
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folloits Articles of Incorporation:	wing amendment
A. If amending name, enter the new name of the corporation:	
Kenneth Jorgensen P.A.	<i>.</i>
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name m word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ust contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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	
O P	
(Florida street address)	
New Registered Office Address:	
	Zip Code)
	• •
11 A	
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	on.
gament 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.

Mike Jones, V as Remove Example:	e, and Sal	lly Smith, SV as an Add.	
X Change	<u>PT</u>	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
I) Change		_	
Add		1	
Remove			
2) Change	<u>(-</u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-
Add	/		
Remove		\ \ \	
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	•		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or ad Attach <i>additional s</i>	ling additional A heets, if necessar	vicles, enter cha v). (Be specific)	nge(s) here:			
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an amendment r	rovides for an e	change, reclassif	ication, or cancel	lation of issued s	shares,	
<u>rovisions for imp</u>	lementing the and ble, indicate N/A)	<u>mendment if not c</u>	ontained in the a	mendment itself		
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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 w document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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	
(voting 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 9-3-19	
Dated	
Signature Aun Ma	
(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)	
appointed fiductary by that fiductary)	
Hairch Torgensen	Ŷ
(Typed or printed name of person signing)	
King! Stered BWHER I TENSON ME, KONHELL SU	gensey
Registered <u>DWHER" Person</u> ME, Kentheth Jun Agent	