P18000012011

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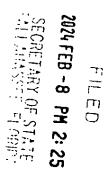
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COI	RPORATION: YANINA L HALL	PA	
DOCUMENT N	D40000043044	<u>-</u>	
The enclosed An	icles of Amendment and fee are su	ıbmitted for filing.	
Please return all	correspondence concerning this ma	atter to the following:	
	YANINA VON SCHNIER		
		Name of Contact Person	n
		Firm/ Company	
	27 6 I SW PALACE AVE		
		Address	
	PORT ST LUCIE, FL 3498	<u></u>	
		City/ State and Zip Code	e
	YANINAVONSCHNIER@0		
	E-mail address: (to be u	sed for future annual report	notification)
For further inforr	nation concerning this matter, plea	se call:	
YANINA VON S	CHNIER	at (⁷⁷²	224-0415
N	ame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	ee	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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Entre of Tallahassee N. Monroe Street, Suite 810 Issee, FL 32303

Articles of Amendment

Articles of Incorporation of

YANINA L HALL PA			-SECO- 18 A
(Name	of Corporation as current	ly filed with the Florida Dep	t. of State / ARV
P18000012011			MASS COES
	(Document Number of	of Corporation (if known)	1.40
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation a	dopts the following amendmen
A. If amending name, enter the new n	ame of the corporation:		
YANINA L VON SCHNIER PA			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp," "Inc," or "Co" .	A professional corporation r	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2761 SW PALACE AVE	
		PORT ST LUCIE, FL 34	1987
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		SAME AS ABOVE	
D. If amending the registered agent an new registered agent and/or the ne			me of the
	YANINA L VON SCHNII		
Name of New Registered Agent			
	2761 SW PALACE AVE		
	PORT ST LUCIE	reet address)	34987
New Registered Office Address:	(City)		, Florida(Zip Code)
		(City)	(Elp Code)
New Registered Agent's Signature, if o	changing Registered Agent	<u>t:</u>	
I hereby accept the appointment as regis	tered agent. I am familiar	with and accept the obligation	is of the position.
	A.	Phiet.	
 -			
	Signature of New R	Registered Agent, if changing	

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)

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	e	
•				
X Remove	V	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·
 .	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

.

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	tion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirement tment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amient for approval.	endment(s)
	red by the shareholders through voting groups. The following the 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)	
JANUARY 30 Dated		
Signature	DA:UT.	
selected, b	tor, president or other officer – if directors or officers have a y an incorporator – if in the hands of a receiver, trustee, or offiduciary by that fiduciary)	
YA	NINA L VON SCHNIER	
_	(Typed or printed name of person signing)	
_	(Title of person signing)	