

P 18000035859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

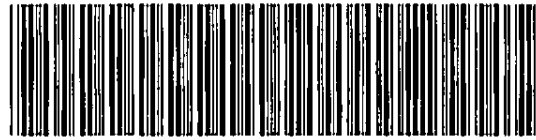
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01/20/23--01020--008 **43.75

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2023 APR 19 AM 11:34
FILING OFFICE

4/29/2023

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EMILY GIMBLETT P.A.

DOCUMENT NUMBER: P18000035859

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emily Isaias
Name of Contact Person

Emily Gimblett P.A.
Firm/ Company

2127 Brickell Avenue APT. 1606
Address

Miami FL 33129
City/ State and Zip Code

emily.gimblett@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Isaias at (310) 279 3542
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2023

EMILY ISAIAS
2127 BRICKELL AVENUE
APT 1606
MIAMI, FL 33129

SUBJECT: EMILY GIMBLETT P.A.
Ref. Number: P18000035859

We have received your document for EMILY GIMBLETT P.A. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

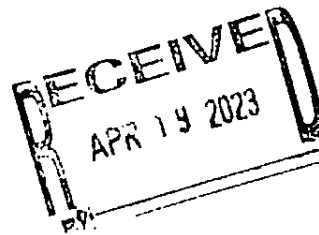
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 823A00006655



Articles of Amendment
to
Articles of Incorporation
of

Emily Gimblett P.A.

(Name of Corporation as currently filed with the Florida Dept. of State)

P 18000035859

(Document Number of Corporation (if known))

FILED

2025 APR 19 AM 11:34

TALLahassee, FL

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:

Emily ISAIAS P.A.

The new 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."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

~~_____~~
~~_____~~
~~_____~~

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 _____

(Florida street address)

New Registered Office Address: _____

(City)

Florida

(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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (1)(c), 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	/
<input type="checkbox"/> Add	_____	_____	
<input type="checkbox"/> Remove	_____	_____	
2) <input type="checkbox"/> Change	_____	_____	
<input type="checkbox"/> Add	_____	_____	
<input type="checkbox"/> Remove	_____	_____	
3) <input type="checkbox"/> Change	_____	_____	
<input type="checkbox"/> Add	_____	_____	
<input type="checkbox"/> Remove	_____	_____	
4) <input type="checkbox"/> Change	_____	_____	
<input type="checkbox"/> Add	_____	_____	
<input type="checkbox"/> Remove	_____	_____	
5) <input type="checkbox"/> Change	_____	_____	
<input type="checkbox"/> Add	_____	_____	
<input type="checkbox"/> Remove	_____	_____	
6) <input type="checkbox"/> Change	_____	_____	
<input type="checkbox"/> Add	_____	_____	
<input type="checkbox"/> Remove	_____	_____	

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

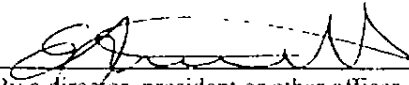
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

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)

Dated 1/31/2023

Signature 
(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)

Emily Isaias
(Typed or printed name of person signing)

~~Registered Agent~~ President
(Title of person signing)