P.18000038106

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COVER LETTER

Division of Corporations Andrea E Gomet P.A. NAME OF CORPORATION: ___ P18000038106 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Andrea E Gomez Firm/ Company 1286 NE 104 St. Niami Shores, Fl.
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 & □\$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

TO: Amendment Section

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

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

	Articles of Ame	ndment		
,	to		•	6 A
	Articles of Incorp	poration	A. C.	12 11
Andrea E	Gomez P.	٨	16.54	Moray 1
(Name of Corne		M . iled with the Florida Dep		· C
	3000038106		i. vi giate)	Co. T.
	ocument Number of C			
ursuant to the provisions of section 607.1006, Fl S Articles of Incorporation:		•	lopts the following a	mendments) to
If amending name, enter the new name of the	ne corporation:			•
· · · · · · · · · · · · · · · · · · ·		Ilviarez P.A.	77.	he new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or	word "corporation," Corp," "Inc," or "Co	"company," or "incorpe". A professional corpore	orated" or the abbr	eviation
Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>		N/A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>: BOX</u>)	N/A		
. If amending the registered agent and/or reg new registered agent and/or the new registe		s in Florida, enter the nan	ne of the	
Name of New Registered Agent	N/A	,, , , , , , , , , , , , , , , , , , ,		
	(Florida street	addrass)		
New Registered Office Address:	NA		, Florida /Zin Cod	.
	(Ci	(ty)	(Zip Cod	(e)
ew Registered Agent's Signature, if changing thereby accept the appointment as registered age		and accept the obligation	s of the position.	
	N/	stered Agent, if changing		
	Signature of New Regi	stered 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 = Treusurer; 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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		<u> </u>	
Add			
Remove			
2) Change		N/A	
Add			A - 1914
Remove			
3) Change	<u> </u>	M/A	
Add			
Remove			
4) Change		N/A	··
Add			
Remove			
5) Change		N/A	
Add			
Remove			
		· /.	
δ) Change		<u>N/A</u>	
Add			
Remove			

. If amending or adding additional Artic (Attach additional sheets, if necessary).	<u>cles, enter change(s) here</u> : (Be specific)
,	N/A
If an amendment provides for an eyeb	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	N/A
	N/A
	** ***********************************

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	plock does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated Of Signature	5/09/2018 THREEDC DZ.	
(By a d selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Andrea & Gonez (Typed or printed name of person signing)	
	Incorporator and Director (Title of person signing)	
	(The of person signing)	