Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000146417 3)))



H180001464173ABC%

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : I20160000067

: (407)370-3686

Phone Fax Number

: (407)370-3120

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: support Clausonacc. com

COR AMND/RESTATE/CORRECT OR O/D RESIGN

MANUELLA K ANDRADE PA

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MAY 11 2018

TALBRITTON

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COVER LETTER

TO: Amendment Sect Division of Corpo			
NAME OF CORPO	RATION: MANUELLA K A	NDRADE PA	
DOCUMENT NUMI	BER: P18000038401		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	CAROLINE G LARSON		
		Name of Contact Person	1
	LARSON ACCOUNTING &	CONSULTING SERVICE	ES LLC
		Firm/ Company	
	7901 KINGSPOINTE PKWY	Y STE 17	
		Address	
	ORLANDO, FL 32819		
		City/ State and Zip Code	=
cump	ort@larsonacc.com		
	•	sed for future annual report	notification)
	D 11341 #3414051 (10 04 #		,,,
For further information	n concerning this matter, pleas	se call:	
CAROLINE G LARSON		at (407	3703686
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Am Div P.C	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

MANUELLA K ANDRADE PA	
(Name of Corporation as en	errently filed with the Florida Dept. of State)
P18000038401	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
MANUELLA ANDRADE PA	The new
	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	n/a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
Name of New Registered Avent	
(Flo	orida street address)
New Registered Office Address:	, Florida(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
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.

X.Change	PI	John Dos	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			<u> </u>
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	<u> </u>		
Rетюче			
6) Change			·
Add			
Remove			

	r adding additional Article nal sheets, if necessary). (i	Be specific)			
_					
		<u>·</u>			
				<u> </u>	 -
	<u> </u>				-
					
	<u> </u>				
					
					
		-			-
.	nent provides for an exchai	nge seclessification	or concellation of i	sured shares.	
provisions (or implementing the amend	iment if not contain	ed in the amendmen	t itself:	
(if not a	opticable, indicate N/A)				
	· · · · · · · · · · · · · · · · · · ·	-			
					_

The date of each amendment date this document was signed.	s) adoption:, if other than the
Effective date <u>if applicable</u> :	· · · · · · · · · · · · · · · · · · ·
	(no more than 90 days after amendment file date)
	his block does not meet the applicable statutory filing requirements, this date will not be listed as the temperature of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/weed by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d 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	(voiling group)
	(voiing group)
☐ The amendment(s) was/we action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	e adopted by the incorporators without shareholder action and shareholder
05/09 Dated Signature	Hamullo Andrade
	y a director, president or other officer - if directors or officers have not been
ſ	elected, by an incorporator — if in the hands of a receiver, trustee, or other court
4	opointed fiduciary by that fiduciary)
	K ANDRADE, MANUELLA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)