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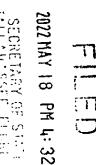
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
3					
J. HORNE					
JUL 25 2022					

Office Use Only



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\$5/18/20-431010-465 +445.75



To Whom it May Concern,

I have recently got married and changed my name from Jennifer Masson to Jennifer Collins. Enclosed is a copy of my driver's license and marriage certificate to show my name has been changed.

I have also enclosed a copy of the articles of amendment for my company Jennifer Masson PA which will now be changed to Jennifer Collins PA. A check for \$43.75 has been included.

Please contact me if you need anything else at this time.

Thank you,

Jennifer Collins 561-891-4834 iamjenmasson@gmail.com

COVER LETTER

TO: Amendment Section

Division of Corpo	orations					
NAME OF CORPOR	RATION: Jennife	, Masson P	A			
DOCUMENT NUME	BER: P1800 00 5	2415				
DUCUMENT NUME	ER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Jennife	r Masson (n	ow Fennihr Collins)			
	Name of Contact Person					
	Jennile Masson PA Firm/Company					
	Firm/ Company					
	421 S Lake	Address -, FL 33460 City/ State and Zip Code	6			
		Address				
	Lake Worth	-, FL 33460				
		City/ State and Zip Cod	e			
	IAMJEN MASSON @GMAIL. COM					
		sed for future annual report	•			
For further information	n concerning this matter, pleas	se call:				
Jennifer	Collins	at (561	891-4834			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	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)			
	ling Address		Address			
	indment Section sion of Corporations		Iment Section on Officerations			
	Box 6327		entre of Tallahassee			
	shassee, FL 32314	2415 N. Monroe Street, Suite 810				
		Tallaha	assee, FL 32303			

Articles of Amendment to Articles of Incorporation oſ

FILED

2022 MAY 18 PM 4: 32

(Name of Corporation as currently filed with the Florida Dept. of State) CRETARY OF STATE TALL AHASSEE, FLORE

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

Jenniter	Collens P.A.		_The new
name must be distinguishable and contain to 'Inc.," or Co.," or the designation "Co 'chartered," "professional association," o	the word "corporation," "company," or "incolorp," "Inc," or "Co". A professional corp or the abbreviation "P.A."	porated" or the abbreviation ration name must contain	m "Corp.," n the word
B. Enter new principal office address, it Principal office address <u>MUST BE A ST</u>			
C. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST O</u>			
new registered agent and/or the new			
Name of New Registered Agent	421 Stakeside Dr. Apt 6	,	-
-	Lake Worth, FL 3346 (Florida street address)	<u> </u>	-
			JbD.
New Registered Office Address:	Cake Worth	, Florida	
	Lake Worth	Florida 33	Code)

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.

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 Jennifer Collins	Address
1) K Change	$\overline{\triangleright}$	Lennifer Collins	Lakeworth, FL 33460
Add			Lakework, & 3346t
Remove			
2)Change		 -	
Add			
Remove 3) Change		<u> </u>	
Add			
Кеточе			
4) Change			
Add			
Remove			
5) Change		 	
Add			
Remove			
6) Change			
Add			
Remove			

		sary). (Be spe	cific)			
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	 			<u>-</u>		
	- -					
						
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<u>rovisions f</u>	nent provides for a or implementing th opticable, indicate N	he amendment i	lassification, or f not contained	cancellation of in the amendme	issued shares, nt itself:	
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The date of each amendment(s) adoption: _	05/13/	2022	, if other than the
date this document was signed.	1 1	_	
Effective date if applicable:	05/13/200	704	
	(no more than 90	days after amendment fil	e date)
Note: If the date inserted in this block does document's effective date on the Department of		able statutory filing requir	rements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by th action was not required.	e incorporators, or b	oard of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		number of votes cast for t	the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin			
"The number of votes cast for the am	endment(s) was/wer	e sufficient for approval	
by		.,,	
(ve	oting group)		
Dated_ 05/13/3	2002		
Signature	2 Colli	us	
selected, by an inc		er – if directors or officers hands of a receiver, truste	
	enviler (
	(Typed or printed n	ame of person signing)	
<u>D</u>	irector		
	(Title of person sig	ning)	