## P180000 55130

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

Office Use Only



800329031328

05/15/13-+01042--010 ★★55.00

2019 T. T 13 PH 4: 24

Hanuad

MAY 2 2 2019 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Gence Maroner, PA
DOCUMENT NUMBER:	18000055130
The enclosed Articles of Amendment and for	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
4	ence Noedser
	Name of Contact Person
	Firm/ Company
2	Address  Wilfox Malors, FL 33305  City/ State and Zip Code
	Address
	Wilfox Malors, FL 33305
	City/ State and Zip Code
ani	arajez. REDITOR @GHAIL. COM
E-mail address:	(to be used for future annual report notification)
For further information concerning this mate	ter, please call:
1 . A	· · · · · · · · · · · · · · · · · · ·
Unice Moravez	at ( 954 ) 258 - 6204  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	nt made payable to the Florida Department of State:
\$35 Filing Fee □\$43.75 Filing     Certificate of	
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of GRACE MAROUEZ, P.A.

Mot. John M. Ou.

(Name of Corporation as currently t	filed with the Florida Dept. of State)
JEACE MARCHEZ PA	filed with the Florida Dept. of State)  F 19000055 130
(Document Number of C	P18000055130 Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flattactures</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MARTIN GENCE	MARONEL RA The now
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.,	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NOT APPLICABLE.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NOT APPLICABLE
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent \\ \docsame \cappa_0 \tag{\cappa}	APPLICOBLE
(Florida street	address)
New Registered Office Address:	, Florida
(Ci	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of New Regi	istered 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RACHEL SIMPSON	2291 LE 9 AVELUE
<u></u> ★ Add			Wilfol Modoes, FL
Remove			33305
2) Change		NOT APPULABLE	
Add			
Remove		1	
3 ) Change	<del></del>	NOT APPLICABLE	·
Add			<del></del>
Remove			
4) Change		MOT APPULLABLE	
Add			
Remove			
5) Change	<del></del>	LOT OPPLICABLE	
Add			
Remove			<del>-</del>
6) Change		LOT APPLICABLE.	
Add			
Remove			

If an amendment prov provisions for implem (if not applicable,		(Be specific)				
If an amendment prov provisions for implem (if not applicable,	LABLE					
provisions for implem (if not applicable,						
provisions for implem (if not applicable,						
provisions for implem (if not applicable,				<del></del>		
provisions for implem (if not applicable,						
provisions for implem (if not applicable,		, <u>-</u>		••		
provisions for implem (if not applicable,				<del></del>		
provisions for implem (if not applicable,			···			_
provisions for implem (if not applicable,						
provisions for implem (if not applicable,						
provisions for implem (if not applicable,						
provisions for implem (if not applicable,	<del></del>					
provisions for implem (if not applicable,						
provisions for implem (if not applicable,						
provisions for implem (if not applicable,	,					
provisions for implem (if not applicable,						
provisions for implem (if not applicable,	<del></del> -			• • •	· <del>-</del> -	<del></del>
provisions for implem (if not applicable,						
provisions for implem (if not applicable,						
provisions for implem (if not applicable,					<del></del>	
provisions for implem (if not applicable,						
provisions for implem (if not applicable,	ides for an exch	ange, reclassificat	ion, or cancell	ation of issued	shares,	
	nenting the ame	ndment if not cont	ained in the a	<u>mendment itse</u>	lf:	
NOT APPL						
	LOBLE					<u>,</u>
						·· <u></u>
			· <del>"</del>	<u></u> .		
				_		<u>-</u>
					<del>_</del>	

The date of each amendment(s) adoption: date this document was signed.	LOT APPLICABLE	, if other than the
Effective date if applicable:	5/9/19	
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not n document's effective date on the Department of State	neet the applicable statutory filing requirements, the's records.	is date will not be listed as the
Adoption of Amendment(s) (CHEC	<u>K ONE</u> )	
☐ The amendment(s) was/were adopted by the shar by the shareholders was/were sufficient for appre	reholders. The number of votes cast for the amendn	nent(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting gro	areholders through voting groups. The following sta tup entitled to vote separately on the amendment(s):	atement
"The number of votes cast for the amendme	ent(s) was/were sufficient for approval	
by	xe"	
(voting)	group)	
☐ The amendment(s) was/were adopted by the boar action was not required.	rd of directors without shareholder action and share	holder
The amendment(s) was/were adopted by the inco action was not required.	rporators without shareholder action and shareholde	er
Dated Signature	19	
(By a director-president	t of other officer – if directors or officers have not brator – if in the hands of a receiver, trustee, or other	court
appointed fiduciary by		
Man	ed or printed name of person signing)	
(Typ	ed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	