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| PICK-UP | WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: THE LAW OFFIC | E OF LESLIE CIMADEVI | LLA, P.A. |
|--|---|--|--|
| DOCUMENT NUMB | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | LESLIE CIMADEVILLA, E | SQ. | |
| | | Name of Contact Person | 1 |
| | THE LAW OFFICE OF LES | LIE CIMADEVILLA, P.A | |
| | | Firm/ Company | |
| | 7900 NOVA DRIVE SUITE | . , | |
| | | Address | |
| | DAVIE, FL 33324 | | |
| | | City/ State and Zip Cod | 8 |
| CIMA | DEVILLALAW@GMAIL.C | COM | |
| | • | sed for future annual report | notification) |
| | | | |
| For further information | n concerning this matter, pleas | se call: | |
| LESLIE CIMADEVII | LLA | 31 (954 | 599-4129 |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | r the following amount made | payable to the Florida Depa | artment of State: |
| S35 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 | | Street Address Amendment Section Division of Corporations Clifton Building | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE LAW OFFICE OF LESLIE CIMADEVILLA, P.A.

| P18000060565 | ently filed with the Florida Dept. | or state) | | |
|--|--|--------------------|--|--|
| (Document Numb | er of Corporation (if known) | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation: | this <i>Florida Profit Corporation</i> ado | pts the following: | | |
| A. If amending name, enter the new name of the corporation | <u>:</u> | | | |
| name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co" or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati | or "Co". A professional corporati | | | |
| B. Enter new principal office address, if applicable: | 7900 NOVA DRIVE | 7900 NOVA DRIVE | | |
| (Principal office address MUST BE A STREET ADDRESS) | SUITE 205 | | | |
| | DAVIE, FL 33324 | <u> </u> | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 7900 NOVA DRIVE | 1 C | | |
| | SUITE 205 | | | |
| | DAVIE, FL 33324 | | | |
| D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add | | of the | | |
| Name of New Registered Agent 7900 NOVA DRIVE S | SUITE 205 | | | |
| | la street address) | | | |
| New Registered Office Address: | • | Florida 33324 | | |
| MEN REVINESEE FRANCES | (City) | (Zin Coo | | |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed 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 Cler Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first lett held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed a a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: | , ana Sai | iy Smun, SV as an Ada. | |
|-------------------------------|--------------|------------------------|-----------------|
| X Change | <u>PT</u> | John Dog | |
| 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 | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | _ | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| | | - | |
| Add | | | |

| | (Re specific) | | | |
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| provisions for implementing the ame | ndinene ii not | | | |
| provisions for implementing the ame | | | | |

| The date of each amendmen date this document was signed | |
|---|---|
| Effective date if applicable: | SEPTEMBER 19TH, 2019 |
| | (no more than 90) days after amendment file date) |
| | this block does not meet the applicable statutory filing requirements, this date will no the Department of State's records. |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
| | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s): |
| "The number of vote | s cast for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| ☐ The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder |
| SEPT Dated Signature | TEMBER 19TH, 2019 PRESICENT |
| Q s | By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary) |
| | LESLIE CIMADEVILLA, ESQ. |
| | (Typed or printed name of person signing) |
| | PRESIDENT/SOLE OWNER-SHAREHOLDER |
| | (Title of person signing) |