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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Prince Shaborn Jor	nes Sr. P.A.	
DOCUMENT NUMBE	:R: P18000075723		
The enclosed Articles of	*Amendment and fee are su	bmitted for filing.	
Please return all correspondence	ondence concerning this mat	tter to the following:	
P	rince Jones Sr.		
		Name of Contact Person	1
N	1y-Canvas Inc		
_		Firm/ Company	
6	611 Orion Dr Suite 105		
		Address	
F	ort Myers Fl 33912		
_		City/ State and Zip Code	
PrinceJ	ones@My-Canvas.pro		
<del></del> .		ed for future annual report	notification)
For further information of	concerning this matter, pleas	e call:	
Prince Jones		at (	850-9863
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	rtment 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)
Ameno Divisio P.O. B	ng Address dment Section on of Corporations sox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

to

PRINCE JONES P.A.		į
(Name of Corporation	n as currently filed with the Florida D	ept. of State)
P18000075723		
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation	n adopts the following amendment(s
A. If amending name, enter the new name of the cor	porațion:	
PRINCE SHABORN JONES SR. P.A.		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Co". A professional corp	prporated" or the abbreviation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>	<u>RESS</u> )	120 B T
		3
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	
		99
D. If amending the registered agent and/or registere		name of the
new registered agent and/or the new registered o	ffice address:	
Name of New Registered Agent		
		c
	(Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered agent. I	am familiar with and accept the obligat	ions of the position.
Siona	ture of New Registered Agent, if changin	19

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President: V = Vice I Executive Officer: CFO = held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove,	and/or D if necess rector title President = Chief F r, Directo in the fol wes the co	irector b ary) z by the fi z T= Trec inancial r would t lowing m orporation	irst letter of the office title: usurer; S= Secretary; D= Director; TR= 7 Officer. If an officer/director holds more be PTD. anner. Currently John Doe is listed as the n, Sally Smith is named the V and S. These	Frustee: C = Chairman or Clerk; Cl than one title, list the first letter of PST and Mike Jones is listed as the	EO = Chief each office V. There is
E <b>xample</b> : <u>X</u> Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>nes</u>		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change	<del></del>	_			<del>-</del>
Add					_
Remove					_
2) Change		_			_
Add					_
Remove					
3) Change		_			_
Add					_
Remove					
4) Change		_			_
Add					_
Remove					_
5) Change					
Add		_			_
Add Remove					
Keniove					
5) Change		_			_
Add					

Remove

Attach additional sheets, if necessary).	(Be specific)
- <del></del>	
	<del>-</del>
<del></del>	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis and an analysis and an an

The date of each amendment(s) aduption:	if other than the
date this document was signed.	j
Effective date if applicable:	
(no more than 90 days after amendment file datc)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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"  (voting group)	Ì
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
1/25/2019 Dated	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Prince Jones Sr.	
(Typed or printed name of person signing)  (Typed or printed name of person signing)	