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COVER LETTER

Division of Corporations y Business Law Firm P.A. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & **□**S43.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Articles of Amendment to Articles of Incorporation of Business Law Firm PA (Name of Corporation as currently filed with the Florida Dept. of State)

19 JAH 14 PH 12: 17

(Name of Corporation as currently filed with the Florida Dept. of State)

1800084737

(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 its Articles of Incorporation:

Ortega Tayler & As	and to	, P.A.		The nev
name must be distinguishable and contain the wo	ord "corporation,"	"company," or "inc	orporated" or th	ne abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp.	p." "Inc." or "Co"	". A professional cor	poration name n	iust contain the
word "chartered," "professional association," or the	e abbreviation "P.A	. "		
D. Unter a considerable office address if applicable	lar			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		-		
(1 mequa office maness <u>meet mage constitution</u>	<u></u> ,			
	-			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE By	<u>0X</u>)			
	-			
	-	· · · · · · · · · · · · · · · · · · ·		-
D. If amending the registered agent and/or registe		in Florida, enter the	name of the	
new registered agent and/or the new registered	d of fice address:			
Name of New Registered Agent				
. Address Trees Tr				
	(Florida street a	address)		
New Registered Office Address:			Florida	
•	(Cu	<i>y)</i>		(Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent:			
I hereby accept the appointment as registered agent.		and accept the obliga-	itions of the positi	ion
Siv	mature of Vew Real	stered Agent if chang	ino	

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.

Example: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	6 T
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address PH Z. 1
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ATTION ACTIONAL CHARGE II NACACCUMIII (Ma CHACITIA)	2014 16 L
Attach additional sheets, if necessary). (Be specific)	PH
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f an amendment provides for an exchange, reclassification, or cancellat	tion of issued shares,
provisions for implementing the amendment if not contained in the ame	endment itself:
(if not applicable, indicate N/A)	
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Ay not approante, maicute (NA)	
Ay not approante, maicine (NA)	<u> </u>
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лу пос аррисаоге, такае маз	
у пострысцые, такие ма)	
уу пол аррисаоге, такше гол)	

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ate this document was signed.	
ffective date if applicable:	
(no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will nocument's effective date on the Department of State's records.	ot be listed as the
doption of Amendment(s) (<u>CHECK ONE</u>)	
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):	۰
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	·
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	サード PH 12:1
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	当たっ
Dated 1/10/19	
Signature Suija Ollego-lauder	-
(By a director, president or other officer f 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)	
Elena Octoga-Tauler (Typed or printed name of person signing)	
Door do nt	
(Title of person signing)	
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