P1800009334

Office Use Only



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2018 NOV 26 AM II: 39
SECRETARY OF STATE

R. WHITE NOV 3 0 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Michael J. Nolan,	P.A.	
DOCUMENT NUMI			
	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Michael J. Nolan		
		Name of Contact Perso	n
		Firm/ Company	
	1904 S. Hesperides Street		
	Tampa, Florida 33629	Address	
,		City/ State and Zip Coo	de
mnola	in@jpfirm.com		
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information	n concerning this matter, pleas	se call:	
Michael J. Nolan		at (<u>813</u>	765-8981
Name o	of Contact Person		ode & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	partment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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

FILED

Articles of Incorporation of 20

2018 NOV 26 AM 11: 39

Michael J. Nolan, P.A.	SECRETARY OF STATE
(Name of Corporation	as currently filed with the Florida Dept. 66 State)
P18000093634	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
Michael James Nolan H. P.A.	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
	ered Agent: om familiar with and accept the obligations of the position.
Signatu	re of New Registered 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<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				
Remove				

Attach additional sheets, if necessary).	(Re specific)
•••	
-	
f an amandmant nearlidae far an avol	hange, reclassification, or cancellation of issued shares,
provisions for implementing the appe	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	and ment is not contained in the anichanten resent.
(ij noi appaeane, maicule 1874)	
	
••	

The date of each amendment(s) ad late this document was signed.	option:	, if other than th
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b locument's effective date on the Dep	lock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendaticient for approval.	nent(s)
	roved by the shareholders through voting groups. The following stee 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)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholde	er
November 2 Dated	21. 2018	
Signature	Uxtfal & Nele_	
(By a di solected	rector, president or other officer – if directors or officers have not be l, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)	court
	Michael J. Nolan	
	(Typed or printed name of person signing)	
	President	

(Title of person signing)