P180000 94126

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COVER LETTER

Division of Corporations NAME OF CORPORATION: JEREMY A. MCLYMONT, P.A. <u>P18000094126</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mactindale F. McLymon Name of Contact Person a Law Firm Company W. Cass Stree ampa, Florida 33603 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: 43.75 Filing Fee & ☐ \$35 Filing Fee ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(Additional Copy is enclosed)

Articles of Amendment

to

Articles of Incorporation

θf

JEREMY A. MCLYMO (Name of Corporation as currently f	DNT P.A.
P 1860009412 (Document Number of C	6
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fla</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:	
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
	5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
-	: :
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	1
Name of New Registered Agent	5 Street
New Registered Office Address: 1 ampa	. Florida 33606 (Zip Code)
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
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e)	

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	PT	John Doe		
$\underline{\mathbf{X}}$ Remove	\underline{V}	Mike Jones		
_X Add	_ <u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		···		
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
· Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, Indicate NA)	If amending or adding additional Artic (Attach additional sheets, if necessary).	les, enter chang (Be specific)	(e(s) here:			
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (ii) not applicable, indicate NA1						
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (ii) not applicable, indicate NA1	NIA					
(if not applicable, indicate N/A)						
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(if not applicable, indicate N/A)	If an amendment provides for an excha-	inge, reclassific	ation, or cancellat	tion of issued shar	res,	
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The date of each amendment(s) adoption: date this document was signed.	OCTOBER 21, 2020 if other	than th
Effective date if applicable:	OCTOBER 21, 2020 (no more than 91) days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not be liste of State's records.	ed as th
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by to action was not required.	he incorporators, or board of directors without shareholder action and shareholde	r
E) The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes east for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes east for the ar	nendment(s) was/were sufficient for approval	
by	voting group)	
Dated 2 Signature (By a director, proselected, by an in	resident or other officer - if directors or officers have not been neorporator - if in the hands of a receiver, trustee, or other court ary by that fiduciary)	
Je	(Typed of printed name of person signing)	-
	President (Title of person signing)	