P18000094931

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PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name	e)
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Certified Copies	Certificates of	of Status
Special Instructions to Fi	ling Officer:	
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Ancend Minich

I ALBOY TO

COVER LETTER

TO: Amendment Section Division of Corporations Melanue Bloom 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: Firm/ Company zirmont For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

Mailing Address

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

Articles of Amendment

10

Articles of Incorporation

of

Melanie Bl	oom P.A.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000094	431
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	WAR PA
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	· .
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u>-</u>
	<u></u>
	Ç
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address Name of New Registered Agent Melanie	
(Florida s	treet address)
·	
New Registered Office Address:	Florida Zip Coder
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	it: with and accept the obligations of the position.
Melanil Hayri Signature of Nave	Negistered Agent, if changing
Check if applicable	

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u> </u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>_P</u>	Mélanie Haym	7560 Fairment Ct. Boca Raton, FL 33496
Remove 2) Change Add	P	Melanie Bloom	7560 Fairmont (t. Bora Raton, FL 33496
Remove Change	· · · · · · · · · · · · · · · · · · ·		
Add Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
<u></u>	
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an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(; , , , , , , , , , , , , , , , , , , ,	

ate this document was signed.	doption:, if other tha
-	
Affective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Fore: If the date inserted in this ocument's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed appartment of State's records.
doption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	(voting group)
Dated 9/15	12020
select	irector, president or other officer – if directors or officers have not been ht, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)
	Melanie Haym (Typed or printed name of person signing)