## P18000/0/4/2

(Reque	estor's Name)
(Addre	ess)
(Addre	ess)
(City/S	state/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Busin	ess Entity Name)
(Document)	ment Number)
Certified Copies	Certificates of Status
Special Instructions to Fili	ng Officer:

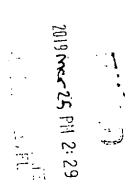




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B/25/19 .... ....

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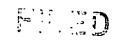


## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:Ramiliar Fritance DN	MI, IP.A.	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Spanoor B. Sioud		
		Name of Contact Perso	n
	Siggdl & Siggdl, P.A.		
	••	Firm/ Company	
	WALLO SLOUGH Divice Mighway ?	Suite 300	
		Address	
	Benca Ration (HL 33452)		
		City/ State and Zip Cod	c
<b>SD8S1</b>	IGHLAMBHIGHL COM	и	
	_	" sed for future annual report	natification)
	15-man address, (to be d:	sea for fatare annual report	. Horrication)
For further information	n concerning this matter, pleas	se call:	
Apanuar Sicual		114E ) 16	(A30 8300)
Name (	of Contact Person		ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment 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)
Amo Divi P.O.	ding Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amen Divisi Cliftor 2661 I	Address  dment Section on of Corporations i Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2019 Mar 25 PH 2: 29

Lonnifion Finitence IDN/M., IP.A.	
(Name of Corporation as c	currently filed with the Florida Dept. of State)
PISHONONENIPALIZ	
(Document Nu	amber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statut ts Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
If amending name, enter the new name of the corporat	tion:
	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:	
Name of New Registered Agent	
(Fl	lorida street address)
	. Florida
New Registered Office Address:	(City) (Zip Code)

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 hold. 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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Zip.	Hirank Historic	 12113 Widliage Drive
X Add			Delray Boach, Himida 33444
Remove			
2) Change			 
Add			
Remove			
3 ) Change		<del></del>	 
Add			
Remove			
4) Change		_	 
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			 
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an amendment provides for an excha	inge, reclassific	ration, or ca	ncellation of	issued share	es,	
orovisions for implementing the amen (if not applicable, indicate N/A)	<u>idment if not co</u>	ontained in t	he amendm	ent itself:		
					<u> </u>	
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<del>-</del>					· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	rys after amendment file date)
THE THE PART OF TH	, a cycl, concountry , accountry
<b>Note:</b> If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were su	afficient for approval
by	·"
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wit action was not required.	hout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.  OSETH/型例的 Dated	shareholder action and shareholder
Signature	SIGNHERE
(By a director, president or other officer-selected, by an incorporator – if in the ha appointed fiduciary by hat fiduciary)	
DENOMBER HRIONE	
(Typed or printed name	e of person signing)
PRESIDENT	
(Title of p	erson signing)