## P1900000 4593

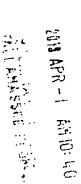
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## **COVER LETTER**

Tallahassee, FL 32314

		COVEREDITER	•	
TO: Amendment Sect Division of Corpo				TO TO TO TO
NAME OF CORPOR	PATION: PAUL J. SANGUI	NETTI P.A.		10000000000000000000000000000000000000
	P19000004593			
DOCUMENT NUMI	BER:		<del></del>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		6
Please return all corres	spondence concerning this ma	tter to the following:		
	Thomas M. Tarsia, Esq.			
		Name of Contact Person	1	
	Jones, Haber & Rollings			
		Firm/ Company		
	1633 SE 47th Terrace			
		Address		
	Cape Coral, FL 33904			<del></del>
		City/ State and Zip Cod	e	
tarsia	@joneshaberlaw.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further informatio	n concerning this matter, plea	se call:		
Thomas M. Tarsia, E.	sq.	at (	542-0700	
Name	of Contact Person	Area Co	de & Daytime Telephone Nur	nber
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
*	endment Section ision of Corporations		Iment Section on of Corporations	
	. Box 6327	Cliftor	Building	
Tal	lahassee, FL 32314	2661 F	Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

PAUL J. SANGUINETTI P.A.			
(Name of Corp	oration as currently f	iled with the Florida Dept	of State)
P19000004593			in the second
(C	Ocument Number of C	orporation (if known)	100 P
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this <i>Fla</i>	orida Profit Corporation ad	lopts the following amendment(s) to
A. If amending name, enter the new name of t	the corporation:		The new
name must he distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp," "Inc," or "Co	". A professional corpora	rated" or the abbreviation ution name must contain the
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET	<u>cable:</u> <u>ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)		
D. If amending the registered agent and/or renew registered agent and/or the new registered	gistered office address:	s in Florida, enter the nan	ne of the
Name of New Registered Agent			<del></del>
	(Florida stree	address)	<del></del>
New Barristand Office Address			. Florida
New Registered Office Address:	(C	ity)	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as	g Registered Agent: gent. I am familiar wit	h and accept the obligation	s of the position.
	Signature of New Reg	istered Agent, if changing	<del></del>

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 Jon	<u>ies</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) X Change	P		Paul J. Sanguinetti	1233 SE 40th Street .
Add				Cape Coral, FL 33904
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			17.10	
Add				
Remove				
6) Change		-		
Add				
Remove				

	—
	—
nange, reclassification, or cancellation of issued shares,	
ndment if not contained in the amendment itself:	
	_
	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment( by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statems must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast 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.	ег
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature  (By a director, president or other officer – it directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other courappointed fiduciary by that fiduciary)	rt
Paul J. Sanguinetti	
(Typed or printed name of person signing)	
President	
(Title of person signing)	