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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Lindsey Lakins, P.A.
P1000010037 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: Lindsey Schuetz Firm/ Company Indialantic, FL 32903 City/ State and Zip Code Lindsey @ hoven realestate. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **☑** \$35 Filling Fee ☐\$43,75 Filing Fee & **□\$43.75** Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation

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| Lindsey Lak  | Gins, P.A.   | وــ                 |
|--|--|---------------------|
|  | v filed with the Florida Dept. of State)   | B AT                |
| P19000016  | 037  | S 1/2 (             |
| (Document Number of  | f Corporation (if known)   | 窓って                 |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this atts Articles of Incorporation:   | Florida Profit Corporation adopts the fol  | llowing amendment   |
| A. If amending name, enter the new name of the corporation:  |  |                     |
| Lindsey Sc   | huetz, P.A.  | The new             |
| name must be distinguishable and contain the word "corporation," "c." inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | company," or "incorporated" or the abbre<br>1 professional corporation name must c | contain the word    |
| B. Enter new principal office address, if applicable:  | 3 Jennifer Cir   |                     |
| (Principal office address MUST BE A STREET ADDRESS)  | 3 Jennifer Cir<br>Indialantic, FL  | 32903               |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 3 Jennifer Cir.<br>Indialantic, FL   | 32903               |
| D. If amending the registered agent and/or registered office address:  Name of New Registered Agent Linds Linds Linds  |  |                     |
| 3 Jennifer   | Cic  |                     |
| (Florida str   | vet address)   |                     |
| New Registered Office Address: Indialantic   | , Florida_   | 32903<br>(Zip Code) |
|  |  | ituon.              |
| Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (  | (e), F.S.  |                     |
| The amendment(s) was/were adopted by the incorporators, or boar  | rd of directors without shareholder action   | and shareholder     |

action was not required.

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.

| 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) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1)Change                   |              | N/A         | _               |
| Add                        |              | •           |                 |
| Remove                     |              |             |                 |
| 2) Change                  |              | _           |                 |
| Add                        |              |             |                 |
| Remove 3) Change           | <u></u>      |             |                 |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |
| 4) Change                  |              |             |                 |
| Add                        |              |             |                 |
| Remove                     |              |             | •               |
| 5) Change                  |              |             |                 |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |
| 6) Change                  |              | _           |                 |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |          |
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| . 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 N/A)      |          |
|   |          |
| n/A   |          |
|   |          |
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| The date of each amendment(s) date this document was signed.        | adoption:   | if other than the                       |
|---|---|---|
| Effective date if applicable:                                       |   |   |
|   | (no more than 90 days after amendment file date,  | )                                       |
| Note: If the date inserted in this document's effective date on the | block does not meet the applicable statutory filing requirement of State's records.   | ts, this date will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)   |   |
| The amendment(s) was/were a by the shareholders was/were            | dopted by the shareholders. The number of votes cast for the am sufficient for approval.  | endment(s)                              |
|   | proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen   |   |
|   | t for the amendment(s) was/were sufficient for approval   |   |
| by  | (voting group)  |   |
|   | (voling group)  |   |
| Dated 0   | 15.2020   |   |
| Signature   |   |   |
| (By a select  | director, president or other officer – if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary) |   |
|   | (Typed or printed name of person signing)   |   |
|   |   |   |