P19000019687

(Req	questor's Name)	
(Add	lress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
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A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

Mailing Address
Amendment Section

P.O. Box 6327

Division of Corporations



NAME OF CORP	ORATION: CHABO & ASSO	CIATES, INC				
	MBER: P19000019687					
The enclosed Articl	es of Amendment and fee are su	ibmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	ROBERT RECKLEIN					
		Name of Contact Person	n			
	VANDERBILT COMPANIE	ES, INC				
	<u> </u>	Firm/ Company				
	11983 TAMIAMI TRAIL N STE 138					
	-	Address				
	NAPLES, FL 34110					
	A	City/ State and Zip Cod-	0			
	VANDERBILTRJR@ATT.N	VET				
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, pleas	se call:				
ROBERT RECKLE	IN	at (²³⁹	de & Daytime Telephone Number			
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			

Street Address
Amendment Section

Division of Corporations

The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

0 UNDO 1 A 000 CONTROL DO FILED

CHABO & ASSOCIATES, INC	1 the but led	
(Name of Corporation as curren	tly filed with the Florida Dept. of State) PH 1: 24	
P19000019687		
(Document Number	of Corporation (if known) CURE LAGAL OF STATE TALL AHASSEE, FL	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new name of the corporation:		
	The new	
name must he 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	
3. Enter new principal office address, if applicable:	12268 TAMIAMI TRAIL E. # 302	
Principal office address MUST BE A STREET ADDRESS)	NAPLES, FL 34113	
C. Patra and an all and the second a		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12268 TAMIAMI TRAIL E. #302	
	NAPLES. FL 34113	
). If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	
 If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres 		
new registered agent and/or the new registered office addres		
new registered agent and/or the new registered office addres Name of New Registered Agent		
new registered agent and/or the new registered office addres Name of New Registered Agent	58:	

Signature of New Registered Agent, if changing

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)

Add

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 Doc 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 \underline{V} Mike Jones X Add \underline{SV} Sally Smith Type of Action <u>Title</u> <u>Name</u> Address (Check One) 1) ____ Change ____ Add Remove 2) ____ Change ____ Add __ Remove 3) ___ Change ____ Add ___ Remove 4) ____ Change ____ Add Remove 5) ____ Change ____ Add ____ Remove 6) ____ Change

Attach additional sheets, if necessary).	(Be specific)			
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				<u>_</u>
If an amendment provides for an exc	hange, reclassification, o	cancellation of issued sh	iares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained	in the amendment itself:		
(i) not applicable, marcine (VA)				
				

The date of each amendment(s) adoption:	other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 will not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	older
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
Signature (By a director, president ocother officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) CHANCE BOHM	
(Typed or printed name of person signing)	
(Typed or printed name of person signing) PRESIDENT	