## P190000 19716

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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2019 APR - 2 A 80 88

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ALLY LEGAL SE	ERVICES PA	
	1BER: P19000019716		
	es of Amendment and fee are su	abmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	MICHELLE HOFFMAN WI	ROBEL	
		Name of Contact Perso	n
	WROBEL ACCOUNTING		
		Firm/ Company	
	910 LITHIA PINECREST R	D	
		Address	
	BRANDON, FL 33511		
		City/ State and Zip Cod	le
МІС	CHELLE@WROBELACCOUN	NTING COM	
	•	sed for future annual report	notification)
	,	•	,
For further informati	on concerning this matter, pleas	se call:	
MICHELLE HOFF	MAN WROBEL	813 at (	514-8273 ode & Daytime Telephone Number
Name	e of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check (	for 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 E	Address  Iment Section on of Corporations Building Executive Center Circle
Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio Clifton 2661 E	Iment Section on of Corporations Building

## Articles of Amendment to Articles of Incorporation of

FILED

		2911_1P4 - 7 A & 09
(Name of Corpo	oration as currently filed with the Florida	
	P19000019716	SECHEJARN GESTATEL
(D	Ocument Number of Corporation (if known	)
ursuant to the provisions of section 607.1006, Fl s Articles of Incorporation:	lorida Statutes, this Florida Profit Corpora	tion adopts the following amendment(
. If amending name, enter the new name of the	he corporation:	
LLY LEGAL PA		The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or	Corp," "Inc," or "Co". A professional c	ncorporated" or the abbreviation
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>		
. Enter new mailing address, if applicable:	F ROY	
(Mailing address <u>MAY BE A POST OFFICE</u>		
(Mailing address <u>MAY BE A POST OFFICE</u>		
	gistered office address in Florida, enter th	ne name of the
. If amending the registered agent and/or reg	gistered office address in Florida, enter th	ne name of the
. If amending the registered agent and/or reg new registered agent and/or the new registe	gistered office address in Florida, enter th	ne name of the
. If amending the registered agent and/or reg new registered agent and/or the new registe	gistered office address in Florida, enter the ered office address:	ne name of the

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 Do	<u>oe</u>	
X Remove	$\overline{\Lambda}$	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				<del></del>
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add		<del></del>		
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
<del> </del>	
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
,	

The date of each amendment(s) adoption date this document was signed.	:, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this block do document's effective date on the Department	bes not meet the applicable statutory filing requirements, this date will not be listed as the not of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
The amendment(s) was/were approved to must be separately provided for each was	by the shareholders through voting groups. The following statement of oting 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)
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
March 26, 2019	
Dated	Ingle M. Ox
(By a director.	president of other officer - if directors or officers have not been incorporator - if in the hands of a receiver, trustee, or other court
	uciary by that fiduciary)
Angel	а Тогтеу
	(Typed or printed name of person signing)
Presid	ent
	(Title of person signing)