P19000019716

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Ally Legal, P.A.				
	BER: P19000019716				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Angela Tormey				
		Name of Contact Person			
	·	Firm/ Company			
	1070 Bloomingdale Ave				
		Address			
	Valrico, FL 33596				
		City/ State and Zip Code	:		
For further informati	E-mail address: (to be us on concerning this matter, pleas				
	e of Contact Person	at (Area Co	de & Daytime Telephone Number		
	for the following amount made		-		
\$35 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)		
Mailing Address		Street Address			
	mendment Section		Iment Section		
	vision of Corporations O. Box 6327	Division of Corporations The Centre of Tallahassee			
Tollahassaa El 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Ally Legal P.A.		
(Name of Corporation as	currently filed with the Florida Dept. of State)	
P19000019716		
(Document t	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this <i>Florida Profit Corporation</i> adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	
ACEMaven Legal, P.A.		The new
name must be distinguishable and contain the word "corpor" Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation.	"Co". A professional corporation name must con	
B. Enter new principal office address, if applicable:	n/a	
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>)	
		2023 AP
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	R 1 1
	<u></u>	
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the	<u> </u>
new registered agent and/or the new registered offic		
Name of New Registered Agent		
-	(Florida street address)	
New Registered Office Address:	, Florida	21 Z1 1.1
	(City)	(ip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the obligations of the position	on.
Signature	of New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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 Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		n/a 	
Add			
Remove			
2) Change		n/a	
Add			
Remove 3) Change		n/a 	
Add			
Remove			
4) Change		n/a	
Add			
Remove			
5) Change		n/a	
Add			
Remove			
6) Change		n/a	
Add			
Remove			

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f an ar	nendment provid	es for an exch	ange, reclassif	ication, or can	cellation of is:	ued shares.	
	ions for implement not applicable, inc	ating the amer	idment if not	contained in th	e amendment	itseir:	
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	adoption:	, if other than th
ite this document was signed.		
**	3/2023	
Tective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
ote: If the date inserted in this ocument's effective date on the	block does not meet the applicable statutory filing requirements. Department of State's records.	s, this date will not be listed as the
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
must be separately provided j	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	g statement t(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
4/2/2023) 	
Dated Signature		
(By a selec	a director, president or other officer – if directors or officers have octed, by an incorporator – if in the hands of a receiver, trustee, or cointed fiduciary by that fiduciary)	
	Angela Tormey	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	