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C. GOLDEN

JAM 2 8 2020

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: SUPREME LAW GROUP, P.A.
DOCUMENT NUMBER: <u>P19000059045</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MERRILL HAWK Name of Contact Person Supreme Law Group P.A. Firm/ Company Street Address SAINT AUGUSTINE F. 32080 City/ State and Zip Code
E-mail address: (to be used for future annual report not fication) For further information concerning this matter, please call:
MERRILL HAWK at (813) 230 -1303 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

rticles	01	incor	porat	non

20/0 De 23 P/4 /1:02 (Name of Corporation as currently filed with the Florida Dept. of State)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

name must be distinguishable and contain the word "				
'Inc.," or Co.," or the designation "Corp," "Inc 'chartered," "professional association," or the abb		rofessional corporatio	m name must contai	n the wo
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET AL</u>		N/A		
Enter new mailing address, if applicable:		N/A		
(Mailing address <u>MAY BE A POST OFFICE B</u>	-	14//		
If amending the registered agent and/or regist new registered agent and/or the new registere		s in Florida, enter the	name of the	
Name of New Registered Agent	NA			-
	(Florida street	address)		_
			, Florida	
New Registered Office Address:		ผัง	(Zip C	oder
New Registered Office Address:	AC I			
New Registered Office Address: Sew Registered Agent's Signature, if changing Rehereby accept the appointment as registered agent.	egistered Agent:	i and accept the obliga	ttions of the position.	

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.

Mike Jones, V as Remov	e, and Sa	lly 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	STEVEN PELLINGRA	14802 PAR LLUB CIRCLE
Add Remove			Tampa, FL.
2) Change	P	ROBERT MACKINNON	213 11th Street
Add Remove 3) Change			Saint Augustine, LL 32080
3) Change			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
F. If amonding or addi	na addit	ional Artialise anton abanques barro	

(Attach additional sheets, if necessary).	(Be specific)
NIA	

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F. If an amendment provides for an excha	nge, reclassification, or cancellation of issued shares,	
provisions for implementing the amend (if not applicable, indicate N/A)	dment if not contained in the amendment itself:	
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provisions for implementing the amend (if not applicable, indicate N/A)	Page 3 of 4	han the
provisions for implementing the amend (if not applicable, indicate N/A) NA P The date of each amendment(s) adoption: _ late this document was signed.	Page 3 of 4 NA if other th	han the
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement by voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the	he amendment(s) was/were sufficient for approval	
by	·*	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 12/12	119	
(By a directe selected, by	or, president or other officer – if directors or officers have not been an incorporator – it in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	
	STEVEN ELLINGERTY (Typed or printed name of person signing)	
(Tid	PRESIDENT le of person signing)	