P19 000070328

(Red	questor's Name)	
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C. GOLDEN MAR 1 3 2020

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORA	TION: M.P.	Cahill, PA	
DOCUMENT NUMBER	0190	00070328	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
	M:	chael P. Cahill	
	M.	Name of Contact Person	
	618 E South	Firm/Company St. Suite 5 Address City/ State and Zip Code Code St. Address	000
	Orlando,	FL 32801	
	, , , , , ,	City/ State and Zip Cod	e
	Michael C	chill 100 gm	iail. Com
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
Michael	Chill	at (407	820-6322
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:
X \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendi Division P.O. Bo	rent Section of Corporations ox 6327 ssee, F1, 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

			· 1 }
M.P.	Cahill, P.A.	2022 55-	? 20 - Pif- 1: 25
(Name of Corpo	oration as currently filed with	the Florida Dept. of State)	, eu in 1: 2 5
P1900	00070328		
(D	ocument Number of Corporation	on (if known)	
ursuant to the provisions of section 607.1006, Fl s Articles of Incorporation:	lorida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the follow	wing amendment(s)
. If amending name, enter the new name of t	he corporation:		
ame must he distinguishable and contain the wor	ill Figueroa.	2.A.	The new
ame must he distinguishable and contain the wor Inc.," or Co.," or the designation "Corp," ' chartered," "professional association," or the c	'Inc," or "Co". A profession	or "incorporated" or the abbrevi nal corporation name must cor	ation "Corp.," itain the word
. Enter new principal office address, if applie Principal office address <u>MUST BE A STREET</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.)	gistered office address in Flor	ida, enter the name of the	
•			
Nume of New Registered Agent	• • • • • • • • • • • • • • • • • • • •		
	(Florida street address)		
New Registered Office Address:	i toriuu sireet uuuressy	, Florida	
New Registerea Office Address.	(City)		(ip Code)
lew Registered Agent's Signature, if changing hereby accept the appointment as registered ago		cept the obligations of the positic	o n .
	Signature of New Registered A	gent, 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	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One) 1) Change	\bigvee	Christina Figuera	618 E South St.
Add		Christina Figuera	Suite 500
Remove			Orlando, FL 3280
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
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an amendment provides for an exchi-	ange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	
Clasistina Figura	om the 100 Shares owned by Michael Cahil
Chilistina Figure	Will receive 31 sharps of voting common
stock transferred fro	om the 100 Shares owned by Michael (ahil

The date of each amendment(s) adoption: date this document was signed.	, if	other than the
Effective date if applicable:		
(n	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not n document's effective date on the Department of Sta	meet the applicable statutory filing requirements, this date will not bate's records.	e listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the incoaction was not required.	orporators, or board of directors without shareholder action and sharel	holder
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approximation and the shareholders was/were sufficient for approximation and the shareholders was/were sufficient for approximation and the shareholders was/were adopted by the shareholders was/were sufficient for approximation and the shareholders was/were sufficient for a shareholder was	reholders. The number of votes cast for the amendment(s) roval.	
	nareholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendm	nent(s) was/were sufficient for approval	
by		
by(voting ,	group)	
Dated_ 29 202	20	
Dated 129200 Signature Mill W		
	nt of other officer - if directors or officers have not been	
appointed fiduciary by	that fiduciary)	
Mic	chae (ahill bed or printed name of person signing)	
(Тур	ped or printed name of person signing)	
	resident	
(Tith	le of person signing)	