## P19000084745

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## COVER LETTER

**):** Amendment Section Division of Corporations

AME OF CORPO	RATION: CRAIG B. SHERM	IAN, P.A. 	
DCUMENT NUMI	BER:		
ne enclosed Articles	of Amendment and fee are sub	omitted for filing.	
ease return all corre	spondence concerning this mat	ter to the following:	
	CRAIG B. SHERMAN		
		Name of Contact Perso	on
		Firm/ Company	
	2000 GLADES RD. SUITE 2	04	
		Address	
	BOCA RATON, FL 33431		
		City/ State and Zip Cod	de
craig	@shermanslaw.com		
5	E-mail address: (to be us	ed for future annual repor	rt notification)
			,
or further informatio	n concerning this matter, pleas	e call:	
Craig B. Sherman		305 at (	793-4666 ode & Daytime Telephone Number
Name	of Contact Person	Area C	ode & Daytime Telephone Number
nclosed is a check for	or the following amount made p	payable to the Florida De	partment 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amer Divisi The C 2415	t Address Induction Section It is a Composition of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 Inassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

RAIG B. SHERMAN, P.A.

(Name of Corporation	on as currently filed with	the Florida Dept. of State	<u>(2)</u>	
19000084745				
(Docun	nent Number of Corporation	on (if known)		
ursuant to the provisions of section 607.1006, Florida Articles of Incorporation:	a Statutes, this <i>Florida Pro</i>	fit Corporation adopts the t	following amend	ment(s) to
. If amending name, enter the new name of the co	orporation:			
RAIG B. SHERMAN, INC.			The n	iew
ame must be distinguishable and contain the word "co Inc.," or Co.," or the designation "Corp," "Inc, Chartered," "professional association," or the abbre	" or "Co $\frac{1}{1}$ ". A profession		breviation "Corp	)., <sup>**</sup>
Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD		<del></del>		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO  If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Flor	ida, enter the name of the		- - - - - -
new registered agent and/or the new registered	omee address.			
Name of New Registered Agent	<u></u>			$\cup$
	(Florida street address)			
New Registered Office Address:	(City)	, Florida_	(Zip Code)	<u></u>
ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	I am familiar with and acc		osition.	
Signo	ature of New Registered Ag	zent, if changing		

= President; V= Vice F cecutive Officer; CFO = resident, Treasurer, Dire hanges should be noted to change, Mike Jones leav like Jones, V as Remove,	if necess ector titl resident Chief Fi ector woi in the foi es the c	cary)  be by the first letter of the office;  T = Treasurer; S = Secretar  inancial Officer. If an officer,  uld be PTD.  Ilowing manner. Currently J  orporation, Sally Smith is na	y; D= Director; TR= Tru /director holds more than /ohn Doe is listed as the P.	istee; C = Chairman or Clerk; CEO = Chief one title, list the first letter of each office held. ST and Mike Jones is listed as the V. There is nould be noted as John Doe, PT as a Change,
xample: <u>√</u> Change	<u>PT</u>	John Doe		
<u>√</u> Remove	<u>V</u>	Mike Jones		
<u>×</u> Add	<u>sv</u>	Sally Smith		
ype of Action Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
Change			<del> </del>	
Add				
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		Page	2 of 4	
. If amending or addin (Attach additional shee		onal Articles, enter change( cessary). (Be specific)	(s) here:	

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

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		<del></del>
(if not applicable, indicate N/A)	_	
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	I	
	Page 3 of 4	
date of each amendment(s) adoption:this document was signed.		
ective date <u>if applicable</u> :		
(no i	nore than 90 days after am <mark>endment file d</mark> at	te)

ument's effective date on the Department of State's records.
option of Amendment(s) (CHECK ONE)
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"
by"  (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 12-12-2019
Signature New Mene
(By a director, president or other 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)
CRAIG B. SHERMAN
(Typed or printed name of person signing)
OWNER / President
OWNER / President (Title of person signing)

e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the