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2021, HOY 22 MH II: 38 SEGRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: PINA V. CAMPBI	ELL PA		
	P20000001902			
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	PINA VANNA			
		Name of Contact Persor	1	
	PINA V. CAMPBELL PA			
		Firm/ Company		
	43722 SPARROW DRIVE			
		Address		B
	PUNTA GORDA, FL 33982			蓝
		City/ State and Zip Code		
				22. 22
	PINA@PINAVANNA.COM			3至 =
	E-mail address: (to be us	ed for future annual report	notification)	
For further informati	ion concerning this matter, pleas	se call:		2024HOV 22 MILLI 38 SECRETARY OF STATE
PINA VANNA		at (239	398-9066	
Name	e of Contact Person		de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
<u>M</u> :	ailing Address	Street	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PINA V. CAMPBELL PA

(No-coffee		y filed with the Florida Dept.	of State)
P20000001902	rporation as currenti	y med with the Florida Dept.	of State)
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006. its Articles of Incorporation:		•	opts the following amendment(s) to
A. If amending name, enter the new name of PINA VANNA , PA	of the corporation:		The new
name must be distinguishable and contain the will inc.," or Co," or the designation "Corp," chartered," "professional association," or the	" "Inc," or "Co"		
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		N/A	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new reg	registered office add		2024 10V 22 14 11:38 SERETARY OF SEE AT LE
	(Florida str	eet address)	
New Registered Office Address: N/A	· · · · · · · · · · · · · · · · · · ·		Florida
New Registered Agent's Signature, if change I hereby accept the appointment as registered to	ing Registered Agent		(Zip Code) of the position.
	Signature of New R	egistered Agent, if changing	_
Check if applicable	G 9		

☐ 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	N/A		
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			SEC 1.
Remove			
5) Change		_	AHA 22 F
Add			
Remove			
6) Change			113 -
Add			
Remove			

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f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	<u>s 2</u>
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	11/15/2024		
The date of each amendment(s) as date this document was signed.	loption:		, if other than the
	5/2024		
Effective date <u>if applicable</u> :	(no more than S	00 days after amendment fi	le date)
Note: If the date inserted in this bldocument's effective date on the De		cable statutory filing requ	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ado action was not required.	pted by the incorporators, or	board of directors without	shareholder action and shareholder
■ The amendment(s) was/were ado by the shareholders was/were su		e number of votes cast for	the amendment(s)
☐ The amendment(s) was/were app must be separately provided for			
"The number of votes cast	for the amendment(s) was/wo	ere sufficient for approval	
by		<u>.</u>	
	(voting group)		
11/15/2024 Dated			
Signature	Ina Vama	-	
selected	rector, president or other offi l, by an incorporator – if in the ed fiduciary by that fiduciary	ne hands of a receiver, trus	
	PINA VANNA		
•	(Typed or printed	name of person signing)	
	PRESIDENT		2024 SEQ1
	(Title of person s	gning)	2024 HOV 22 AM II: 38 SEQRETARY OF STATE TALLAHASSEE, FL