## P20000012569

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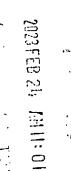
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## **COVER LETTER**

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TO: Amendment Se Division of Cor			_r
NAME OF CORPO	DRATION: Laurie Colon, PA		
	1BER: P20000012569		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Laurie Woods		
		Name of Contact Person	
	·	Firm/ Company	
	826 Coconut Dr		
		Address	
	Fort Lauderdale FL 33315		
		City/ State and Zip Code	
	ljcolon17@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Laurie Woods		954.449.391 at (	6) le & Daytime Telephone Number
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	rtment 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)
	ailing Address		<u>Address</u>
	nendment Section	Amendment Section	
	vision of Corporations  D. Box 6327	Division of Corporations The Control of Tulleborges	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Laurie Colon, PA

	tly filed with the Florida Dept. of State)		
P20000012569			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the foll	owing am	endment(s)
A. If amending name, enter the new name of the corporation:			
Laurie Woods. PA		The	new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", " "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	viation "C ontain the	Corp.," e word
B. Enter new principal office address, if applicable:	826 Coconut Dr		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Fort Lauderdale, FL 33315		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		() () ()	
		1,7	** TEETS
			7
		<u> </u>	-
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		<u></u>	
Name of New Registered Agent			
	treat address		
(Florida st	ree uuuressy		
(Florida st. New Registered Office Address:	. Florida		

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		<del></del>	
Add			2073
Remove			
2) Change			N Chart
Add			3 
Remove 3) Change			——————————————————————————————————————
Add			
Remove			<del></del>
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific)	
ij/A	
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	- <del></del> 2
	15 12
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	<u>f:</u>
(if not applicable, indicate N/A)	
1,14	

The date of each amendment(s) add date this document was signed.	option:		if other	than the
01/01	/2023			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, tartment of State's records.	his date will no	t be list	ed as the
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without sharehold	er action and sha	areholde	r
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amend ficient for approval.	lment(s)		
* *	oved by the shareholders through voting groups. The following s ach voting group entitled to vote separately on the amendment(s,		21	
	or the amendment(s) was/were sufficient for approval		2023 FEB	· · · · · · · · · · · · · · · · · · ·
by	(voting group)		8 2l <sub>+</sub>	
01/15/23		· · :	AM II:	# 1; =;
Dated	anni Woods		l: 02	22
(By a dire selected.	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or othe d fiduciary by that fiduciary)			
1.	aurie Woods			
_	(Typed or printed name of person signing)			
Į <sup>t</sup>	the PTD			
_	(Title of person signing)			•