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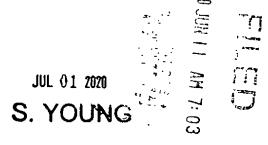
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ation: <u>Manny</u> er: <u>P20000071</u>	Nieres P.A.	
The enclosed Articles o	f Amendment and fee are su	omitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
-	Mann	Nieves  Name of Contact Person	
_	Jewiny	Nicves P. A. Firm/Company	
_	10411 Neddy	Tein Road We Address	ek. wachre, FL 34613
	Weel	K. Wacher, Fr	<u> 34613</u>
	`	City/ State and Zip Cod	e
- For further information	E-mail address: (to be us	Nieves agento gmassed for future annual report	notification)
Manny	Nicves	at ( 609	
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
⊠ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415 1	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)	
(Document Number	er of Corporation (if knows	n)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his <i>Florida Profit Corpora</i>	ation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:	•		
Emmanuel Nieves P.A.		7	The new
name must he distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered." "professional association," or the abbreviation "P.	. A professional corpora	rated" or the abbreviation	"Corp"
B. Enter new principal office address, if applicable:			3
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			mergent D
		<u> </u>	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<u></u>		. <del>.</del> <u>o</u>
	-		<del>-</del>
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional and the new registered office additional and the new registered office additional and the new registered of the ne		the name of the	
(Florid	la street address)		
(F 107 III	a sireer (aaaress)		
New Registered Office Address:	(City)	, Florida(Zip Co	ode)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	gent:	,	,
Signature of Ne	w Registered Agent, if cha	inging	
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
l) Change				
Add				
Remove				
2) Change	<del></del>	-	<del></del>	
Add				
Remove Change				
Add				
Remove				
4) Change	***			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach <i>additional she</i>	ng additional Art eets, if necessary).	(Be specific)				
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f an amendment pr	ovides for an excl	hange, reclassifi	cation, or cance	<u>llation of issued</u>	shares,	
provisions for impl	ementing the ame	ndment if not c	ontained in the	<u>amendment itse</u>	<u>lf:</u>	
(ij not applican	le, indicate N/A)					
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	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, ment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	I by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the american for approval.	ndment(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following h voting group entitled to vote separately on the amendment	; statement (s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated 5/71/1	5202-6	
Signature 6 mmul	12026 Mc	
(By a direc selected, b	tor, president or other officer – if directors or officers have n y an incorporator – if in the hands of a receiver, trustee, or ot fiduciary by that fiduciary)	
	Emmanuel Nieves (Typed or printed name of person signing)	
	(Title of person signing)	