P20000026458

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: GALLO, MARY LETICIA P.A. DOCUMENT NUMBER: P20000026458 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARY LETICIA GALLO Name of Contact Person MARY LETICIA GALLO P.A. Firm/ Company **13214 SW 44TH STREET** Address MIRAMAR, FL 33027 City/ State and Zip Code SGMGALLO@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 410-6739

Area Code & Daytime Telephone Number STEVEN GALLO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee **■\$**43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

2021 MAD FILED
2021 MAR-2 AMILIED

GALLO, MARY LETICIA P.A. (Name of Corporation as currently filed with the Florida Dept. of State) P20000026458 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: MARY LETICIA GALLO P.A. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) _, Florida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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)

Example:

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.

X Change	<u>PT</u>	John Doc	
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	PRES	GALLO, STEVEN C	13214 SW 44TH STREET
Add			MIRAMAR, FL 33027
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
	(be openy)		
N/A			
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F. If an amendment provides for an exch	nange reclassification or cand	cellation of issued shares.	
provisions for implementing the ame	ndment if not contained in the	e amendment itself:	
(if not applicable, indicate N/A)			
N/A			
		-	
	· · · · · · · · · · · · · · · · · · ·		

	MARCH 20, 2020	ic along the
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment of ficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
FEBRUAF Dated	Naly Solls	
selecte	irector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	
	MARY LETICIA GALLO	
	(Typed or printed name of person signing)	
	OWNER / CEO	
	(Title of person signing)	