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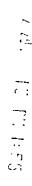


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COVER LETTER

TO: Amendment Section .

Division of Corporations	
Ω and α	nra Rhook, LMFI, P.A.
DOCUMENT NUMBER:	00.18/00
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Barbara Barbara 4154 10	Name of Contact Person Rhodo, LMFT, P.A. Firm/ Company ANGERONAL PERSON Firm/ Company
	Address Shire Fla 337/3 City/ State and Zip Code Ock & hehrail. Con used for future annual report notification)
For further information concerning this matter, ple	ease call:
Barbara Rhode Name of Contact Person	at (727) 4/8-7882 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	
Enclosed is a check for the following amount mad	e payable to the Florida Department of State.
\$35 Filing Fee \$Certificate of Status	Certified Copy (Additional copy is enclosed) S\$2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles	of	Incorporation
		of

Barbara Khove, LMFT, P.	A.	222	10 mm 1:55	
(Name of Corporation as current)	ly filed with the l	Florida D	ept. of State)	
P200000 42100				
(Document Number o	of Corporation (if	known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Co	orporation	adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:				
N/A				TI
name must be distinguishable and contain the word "corporation," "Corporation," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional co	corporate orporation	d" or the abbreviatio name must contair	_The new n "Corp.," n the word
B. Enter new principal office address, if applicable:	10/14			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)				
				
C. Entennance - it's address if the training				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA			
	//		•	
		 -		
				<u>_</u>
D. If amending the registered agent and/or registered office addi	ress in Florida, e	nter the n	same of the	
new registered agent and/or the new registered office address	<u> </u>			
Name of New Registered Agent				
	·			
(Florida str.	eet address)			
	cer adds (say)			
New Registered Office Address:	(City)		, Florida(Zip C	
	(cu),		(Zip C	oue)
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>			
I hereby accept the appointment as registered agent. I am familiar w	vith and accept th	e obligation	ons of the position.	
Signature of New Re	egistered Agent, ij	 f changing	· · · · · · · · · · · · · · · · · · ·	
		υ, ε		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) ((e) FS			
	(4/5 + 15/			

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	PT John [Doe	
X Remove	<u>V</u> <u>Mike</u> .	Jones .	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Timothy Rhock	4154 10th QUE N. 5t. Pele, Fl. 33713
X Add		/	5t. Pele, Fl. 33713
Remove	_	/	
2) Change	\mathcal{I}	Dylan Rhoce	45.30 NW 1134, ANR. Junise, Fl. 33323
X Add		()	Junise, Fl. 33323
Remove 3) Change	 -		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
1 2			
· / / / .			
10/17		· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	·
			-
			_ _ _
***	-		
			
an amendment provides for an exch	inge reclassification or co	meallation of issued share	-
	dmont if not contained in	the amendment itself:	21
<u>rovisions for implementing</u> the amer	ument ii not contained in		
rovisions for implementing the amer (if not applicable, indicate N/A)	ument ii not contained in	-	
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<u>rovisions for implementing</u> the amer	ument ii not contained in		

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	ach amendment(s) adoption: $\frac{7/9/3030}{}$, if other than
Effective date	e if applicable:	
	(no more than 90 days after amendment file date)	
	date inserted in this block does not meet the applicable statutory filing requirements, this date w feetive date on the Department of State's records.	ill not be listed as
Adoption of A	Amendment(s) (CHECK ONE)	
	Iment(s) was/were adopted by the incorporators, or board of directors without shareholder action ar not required.	nd shareholder
	Iment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) reholders was/were sufficient for approval.	
	Iment(s) was/were approved by the shareholders through voting groups. The following statement eparately 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 _	······································	
	(voting group)	
	Dated $7/9/2020$	
	Signature Particua Rhode	
	(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)	
	Barbara Rhock	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

the

the