P20000065682

(Re	questor's Name)	
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COVER LETTER *

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TON: MAYDELIN LEIV	/A DELGADO P	Α			
DOCUMENT NUMBER	R: P20000065682	· · · · · · · · · · · · · · · · · · ·				
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
		ROBERTO G	ONZALE	Z		
_	Name of Contact Person					
	GONZALEZ AND PARTNERS CPAS LLC					
		Firm/ Cor	npany			
	3211 P	ONCE DE LEON	BLVD S	TE 200		
-		Addre	ess			
	CORAL GABLES, FL 33134					
		City/ State and	l Zip Code	2		
		RGONZALEZ@I	RGCPA.N	NET .		
_	E-mail address: (to be us					
For further information co	oncerning this matter, pleas		305	447-8886)		
Name of C	ontact Person	ar (Area Co	de & Daytime Telephone Number		
Enclosed is a check for th	e following amount made	payable to the Flo	orida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified Cop (Additional copenciosed)	py	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amendi Division P.O. Bo	x Address ment Section n of Corporations x 6327 ssee, FL 32314		Amend Divisio The Ce 2415 N	Address ment Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

Articles of Amendment to Articles of Incorporation of

MAYDELIN LEIVA DELGADO PA

(Name of Corporation as currently filed with the Florida Dept. of State) P20000065682 (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: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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) New Registered Office Address: _ (City) (Zip Code) 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)

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 De	<u>ne</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Ar (Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
MENDMENT TO BE MADE TO ART	TICLE III. THE CORRECT "PURPOSE FOR WHICH THIS CORPORATION
ORGANIZED" SHOULD BE THE FO	DLLOWING: BEHAVIOR ANALYST TECHNICIAN
	
	
	
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	story filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of daction was not required.	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voti must be separately provided for each voting group entitled to vote sepa	V =
"The number of votes east for the amendment(s) was/were sufficient	ent for approval
by	
(voting group)	
08/31/2020 Dated	
Signature	
(By a director, president or other officer - if di	
selected, by an incorporator – if in the hands o appointed fiduciary by that fiduciary)	f a receiver, trustee, or other court
MAYDELIN LEIVA DE	LGADO
(Typed or printed name of p	
	erson signing)
AMBR	
(Title of person signing)	