P21000010351

(R	Requestor's Name)	· · · <u>· · · · · · · · · · · · · · · · </u>
(A	ddress)	
(A	address)	<u> </u>
(C	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Nan	ne)
	Ocument Number)	_
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Papa Injury Law Co	orp.	
DOCUMENT NUM	1BER: P21000010351		
	es of Amendment and fee are su	bmitted for filing.	
Please return all con	respondence concerning this ma	tter to the following:	
	Lisa Papa		
		Name of Contact Person	1
	Papa Injury Law. P.A.		
		Firm/ Company	
	28059 US Hwy 19 N., Suite 3	300	
		Address	
	Clearwater, FL 33761		
		City/ State and Zip Code	
	lpapa1023@aol.com		
		sed for future annual report	notification)
For further informat Lisa Papa	ion concerning this matter, pleas	se call:	458-5688
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made		·
\$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)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation of

Papa Injury Law Corp. (Name of Corporation as currently filed with the Florida Dept. of State) P21000010351 (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: Papa Injury Law, P.A. 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." 28059 US Hwy 19 N., Suite 300 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Clearwater, Florida 33761 C. Enter new mailing address, if applicable: 28059 US Hwy 19 N., Suite 300 (Mailing address MAY BE A POST OFFICE BOX) Clearwater, Florida 33761 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) 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/arc 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	nith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		<u> </u>
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

It amending or a Attach additiona	dding additional Articles sheets, if necessary).	(Be specific)	er change(s) here: cific)			
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nrovisions for	it provides for an exch implementing the ame	iange, reclassifi ndment if not c	cation, or cand ontained in the	amendment it	self:	
(if not appl	icable, indicate N/A)	<u> </u>				
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				, if otl	ner inan
date this document was signed.					
Effective date if applicable:					
	(no mor	e than 90 days after amendment file	e date)		
Note: If the date inserted in t document's effective date on the		he applicable statutory filing requirecords.	rements, this date w	ill not be	listed as
Adoption of Amendment(s)	(<u>CHECK Of</u>	<u>(E</u>)			
The amendment(s) was/wer action was not required.	e adopted by the incorpora	itors, or board of directors without s	shareholder action a	nd shareho	lder
☐ The amendment(s) was/wer by the shareholders was/we		ders. The number of votes east for t	the amendment(s)		
must be separately provide	d for each voting group en	lders through voting groups. The fatitled to vote separately on the ame			
	cast for the amendment(s) was/were sufficient for approval			2022
by					2
<u> </u>	(voting group	1)			
o, <u> </u>	(voting group	1)			JUL -
,) -		7 7 7 6	JUL 2
July I Dated					JUL 20
July I Dated		A fafa		A PER PLO	JUL 20 F1
July I Dated Signature (B	y a director, president or o	ther officer - It directors or officers		A BE STEAR FLORID	JUL 20 PH 2: 2
July I Dated Signature (B se	y a director, president or o	ther officer – A directors or officers – if in the hands of a receiver, trusto		A PAT STEAT FLORIDA	JUL 20 FN 2:
July I Dated Signature (B se	y a director, president or o lected, by an incorporator	ther officer – A directors or officers – if in the hands of a receiver, trusto		A LET SEEL FLORIDA	JUL 20 FN 2: 2
July I Dated Signature (B se	y a director, president or o lected, by an incorporator opointed fiduciary by that f	ther officer – A directors or officers – if in the hands of a receiver, trusto		A BE SEE FLORIDA	JUL 20 FN 2: 2
July I Dated Signature (B se	y a director, president or o lected, by an incorporator opointed fiduciary by that f	ther officer – It directors or officers – if in the hands of a receiver, truste iduciary)		A INTERFECTION INTERFECTION	JUL 20 FN 2: 2