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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MARIA ELIZABE	TH VOGELER PA	
DOCUMENT NUMB	ER: P21000028382		
	<i>f Amendment</i> and fee are su	bmitted for filing.	
Please return all corresp	oundence concerning this ma	tter to the following:	
		MONIQUE TRONCONE	СРА
-		Name of Contact Persor	1
	N	IONIQUE TRONCONE C	PA PA
_	· -	Firm/ Company	
		55 NE 5TH AVE STE 5	501
_		Address	
_		BOCA RATON FL 33-	132
		City/ State and Zip Code	:
	MC	NIQUE@TRONCONE-CI	PA.COM
_	E-mail address: (to be us	sed for future annual report	notification)
F. C. A. C. F. C. C.		11.	
For further information	concerning this matter, pleas	se call:	
MONIQUE TRONCO	NE CPA	56i	) 417 03 08 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:
■ \$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)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

MAR	11.4	EI 17	ARETL	LVAGEL	15 D	DA.

MARIA ELIZABETH VOGELER PA			
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	)	
P21000028382			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the fo	ollowing amendn	nent(s) to
A. If amending name, enter the new name of the corporation:			
MARIA ELIZABETH VOGELER TAMAYO PA		The ne	าเ
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )			
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 adnew registered agent and/or the new registered office addrewing of New Registered Agent		SECRETARY OF STATE	
Triorida S	street address)		
New Registered Office Address:	City) , Florida_	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the po:	sition.	
Signature of New	Registered Agent, if changing	<del></del>	

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 One, 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	
<u>X</u> Add	$\underline{SV}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove Change		_	
 Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
5) Change			
Add			
Remove			

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)	
·		
	THE PROPERTY OF THE PROPERTY O	
·		
if an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(у пол аррасите, такце (у/А)		
··· · · · · · · · · · · · · · · · · ·		
·		

	The date of each amendment(s) adoption:			
	Effective date if applicable:			
	Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)			
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.			
	Adoption of Amendment(s) (CHECK ONE)			
	☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.			
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.				
	☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):			
	"The number of votes east for the amendment(s) was/were sufficient for approval			
	by			
	August 27th, 2021  Dated  Signature  (By a director, president of 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)  MARIA E VOGELER  (Typed or printed name of person signing)  PRESIDENT			
	(Title of person signing)			