## P21000039796

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(Address)			
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(City/State/Zip/Phone #)			
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SECOLIVELLO AMILITIES TALLASSASSEE, FL

J 4/22/2022

#### COVER LETTER

TO: Amendment Section

Division of Corporations

we-Ann Bryan NAME OF CORPORATION: < DOCUMENT NUMBER: <u>\$2100038786</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ste-Ann Bryan Co Miramar, FL 33025 City/ State and Zip Code SULCAN DYLAN (WYCHO). COM ress: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee **□\$43.75** Filing Fee & Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303



#### RECEIVED

# FLORIDA DEPARTMENT OF STATE Division of Corporations SECRETARY OF STATE TALLAHASSEE, FL

April 1, 2022

SUE-ANN BRYAN 3010 ENSENADA WAY MIRAMAR, FL 33025

SUBJECT: SUE-ANN BRYAN CO Ref. Number: P21000038786

We have received your document for SUE-ANN BRYAN CO and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 722A00007684



#### RECEIVED

#### 2022 HAR | | AM | |: 33

## FLORIDA DEPARTMENT OF STATE RETARY OF STATE Division of Corporations TALLAHASSEE, FL

February 24, 2022

SUE-ANN BRYAN 3010 ENSENADA WAY MIRAMAR, FL 33025

SUBJECT: SUE-ANN BRYAN CO Ref. Number: P21000038786

We have received your document for SUE-ANN BRYAN CO and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 522A00004630

#### Articles of Amendment to

### FILED

Articles of Incorporation	2022 455 4-
Sue-Ann Bruan Co	2022 APR 15 AM II: 15
(Name of Corporation as currently filed with the Fl	lorida Dept. of State)   ABACCE STATE
P210000387810	methinable, FL
(Document Number of Corporation (if ki	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Cor</i> its Articles of Incorporation:	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: Sue-Ann Bryan P.A.	
name must be distinguishable and bontain the word "corporation," "company," or "ince	ornorated" or the abbreviation "Com."
"Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional cor "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
<del> </del>	
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, en	ter 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:	, Florida
(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)

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>P1</u>	John Doe	
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			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

REAL ESTATE - SALE	5 ASSOCIATE			
· · · · · · · · · · · · · · · · · · ·				
amendment provides for a	an exchange reclassifica	tion, or cancellation of	issued shares.	
visions for implementing t	<u>he amendment if not cor</u>	tained in the amendme	ent itself:	
(if not applicable, indicate :	M/A)			
			********	<del> </del>
	**************************************			
	,,, · · · · · · · · · · · · · · · · · ·			

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The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fi	
	(no more than 90 days after amenament fi	ie date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requipartment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
⅓-The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for flicient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The jeach voting group entitled to vote separately on the amount	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,	•
	(voting group)	
selected	rector, president or other officer - if directors or officer li, by an incorporator - if in the hands of a receiver, trusted fiduciary by that fiduciary)  (Typed or printed name of person signing)	
	PY+SIden+ (Title of person signing)	