P21000046694

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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J. FASON
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: NADIA DEBBAC	HIE PA	
DOCUMENT NU	MBER: P21000046694		<u></u> _
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	VICTOR VERÐI PA		
		Name of Contact Persor	1
	VERDI ASSOCIATES GRO	UP INC	
		Firm/ Company	
	9681 NW 58TH COURT	The sampany	
		Address	
	PARKLAND, FLORIDA 330		
	- TARREMON, LEVALDA SEA	City/ State and Zip Code	<u> </u>
		City/ State and Zip Code	
	vieverdi@comcast.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, plea-	se call:	
VICTOR VERDI PA		at (829 8397
Name of Contact Person		Area Co) 829 8397 de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 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	hailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, Fl. 32314	Amend Divisio The Co	Address ment Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NADIA DEBBACHIE PA

(Name of Corporation as currently	y filed with the Florida Dept. of State)
P21000046694	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NADIA DEBBACHE PA	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
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 addr	ress in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
tFlorida stre	veet 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 w	with and accept the obligations of the position.
Signature of New Ro	egistered 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 Doc	Ė	
X Remove	<u>V</u>	Mike Jon	n <u>es</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
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				
51 Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary).	ricles, enter change(s) here: (Be specific)
/A	
<u> </u>	
	Land of the state
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
A	
	
=======================================	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco	pplicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s) (CHECK ONE	
The amendment(s) was/were adopted by the incorporate action was not required.	s, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entition.	
"The number of votes east for the amendment(s) v	s/were sufficient for approval
by	202
(voting group)	2021 II.x / 25
-1.61	2.
Dated 5/3/12	P -
Signature Tardia) elstarha
(By a director, president or oth	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary)
MADIA (Typed or p	DEBBACHE inted name of person signing)
PRes	pert)
← (Title of per	nt signing)