## P21000018714

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## COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations PATRICK ARCHER, P. A NAME OF CORPORATION: 000048 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SUNBELT BUSINESS BROKERS OF SOUTH FLORID A IGHWAY 1 ALM SEACH
City/ State and Zip Code For further information concerning this matter, please call: ARCHER at (305) 763 - 4/12

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee \$35 Filing Fee □S43.75 Filling Fee & □\$43.75 Filling Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** 

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

## Articles of Amendment

to

Articles of Incorporation

PATRICK ARCHER, PA
(Name of Corporation as currently filed with the Florida Dept. of State)
P21000048174
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(sits 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)
Vis. Baritains I CM2 at 4 Discuss
New Registered Office Address: Florida (Cuy) (Zup 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  $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :	(no more)than 90 days after amendment file of	3-7-1
Note: If the date inserted in this hadocument's effective date on the Do	clock does not meet the applicable statutory filing requires partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were addaction was not required.	opted by the incorporators, or board of directors without sha	archolder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the ufficient for approval.	; amendment(s)
	proved by the shareholders through voting groups. The foll each voting group entitled to vote separately on the amena	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
hy DAVID A	(Voting group)	-
Dated	127/2021	
Signature	) sent Turky)	esc.
(Byad	rector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee.	
	ed fiduciary by that fiduciary)	or other court
	DAVID KIRK DATRIC (Typed or printed name of person signing)	K ARCHER
	PRESIDENT/Ou	INOT