P21 000 055 024

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	.
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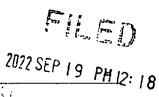
2027 SEP 19 PM 12: 18

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BRITTANY EIBE	N PA		
DOCUMENT NUMI	D21000055024	,-,-,-	***	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	JAMES GUEST			
		Name of Contact Persor	1	
	GUEST PEAVY GUEST CPA'S P.A			
		Firm/ Company		
	759 SW FEDERAL HWY SU	JITE 103		
		Address		
	STUART, FL 34994			
		City/ State and Zip Code		
	JGUEST@GPCPA.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
JAMES GUEST		772	286-9005	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation σf



BRITTANY EIBEN PA

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000055024

A. If amending name, enter the new na	ime of the corporation:			
BRITTANY DOYLE PA		The new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "		
B. Enter new principal office address,	if applicable:	10440 STEPHANIE WAY #403		
Principal office address MUST BE A STREET ADDRESS)		PORT SAINT LUCIE, FL 34987		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		10440 STEPHANIE WAY #403		
<u> </u>		PORT SAINT LUCIE, FL 34987		
new registered agent and/or the nev		dress in Florida, enter the name of the		
	v registered office addre	<u> </u>		
new registered agent and/or the nev	v registered office addre JAMES GUEST 759 SW FEDERAL HW	<u> </u>		
new registered agent and/or the new Name of New Registered Agent	v registered office addre JAMES GUEST 759 SW FEDERAL HW	Y SUITE 103		
new registered agent and/or the nev	v registered office addre JAMES GUEST 759 SW FEDERAL HW (Florida s	Y SUITE 103		
new registered agent and/or the new Name of New Registered Agent	v registered office addre JAMES GUEST 759 SW FEDERAL HW (Florida s	Y SUITE 103 treet address) Florida 34994		
new registered agent and/or the new Name of New Registered Agent New Registered Office Address:	v registered office addre JAMES GUEST 759 SW FEDERAL HW (Florida s STUART	Y SUITE 103 Areet address) , Florida (City) (Zip Code)		
new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	v registered office addre JAMES GUEST 759 SW FEDERAL HW (Florida s STUART	Y SUITE 103 Areet address) , Florida (City) (Zip Code)		
new registered agent and/or the new Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if c	v registered office addre JAMES GUEST 759 SW FEDERAL HW (Florida s STUART	Y SUITE 103 Areet address) , Florida (City) (Zip Code)		

Check if applicable

 \square 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.

Example:

X Change	P1 Joh	m Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	N/X	N/X	NIH
Add			
Remove 2) Change	<u> </u>	_ N/X	N/A
Add Remove 3) Change	NA	<u> </u>	N/A
Add Remove 4) Change Add	NA	N/A	N/A
Remove 5) Change Add	N/A	N/A	~/ H-
Remove 6) Change Add	<u> </u>	NIT	
Remove			

Attach additional sheets,	, if necessary). (Be				
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an amendment provi	des for an exchange,	reclassification,	or cancellation o	f issued shares,	
provisions <u>for i</u> mplem	enting the amendmen	nt if not contain	ed in the amendn	nent itself:	
(if not applicable, i	ndicate N/A)				
		N/A	<u> </u>		
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The date of each amendm date this document was sign	nent(s) adoption:ned.	, if other than the
Effective date <u>if applicabl</u>	e:	<u></u>
	in this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/vaction was not required.	were adopted by the incorporators, or board of directors without shareholder action and sh	nareholder
	were adopted by the shareholders. The number of votes east for the amendment(s) s/were sufficient for approval.	
must be separately prov	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):	1022 SEP 19
k	NAME AND THE INTERIOR OF THE SAME OF THE S	
by	(voting group)	PH 12:
09/ Dated	701/2022	12: 18
Signature	(By a director, president or other officer - if directors or officers have not been	
	scleeted, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	BRITTANY DOYLE	
	(Typed or printed name of person signing)	
	OFFICER	_
	(Title of person signing)	