P21000056679

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A. BUTLER
JAN 27 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ORLANDO	PERSONA	KL INJURY IN	С
DOCUMENT NUMBER:	P210000	86679	th Injury, in	
The enclosed Articles of Amenda				
Please return all correspondence	concerning this matter t	to the following:		
	SEAN	A. DICKE	rsav	
		RAINMAKE Firm/ Company	22 MILLENNIAL	GROUP, LLC
790	1 4TH ST.	N STE Address	300	
<u>\$7.</u>	PETERSBUR	ZG FU Z ity/ State and Zip Cod	300	
			CMAIL, COM	
For further information concerning	ig this matter, please cal	II:		
SEAN DICKET	MSo, M	at (371	de & Daytime Telephone Number	_
Enclosed is a check for the follow				
	ificate of Status (A	\$43.75 Filing Fee & Certified Copy Additional copy is enclosed)	□\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addre Amendment Sec Division of Con	ction	Amend	Address ment Section n of Corporations	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	INJURY
(Name of Corporation as currently	filed with the Florida Dept. of State),
(Document Number of	O 86679 Corporation (if known)
Pursuant to the provisions of section $607,1006$, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A."	Thenew mpany," or "incorporated" or the abbreviation "Corp" 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>)	7901 4TH ST. N STE 300 ST. PETERSBURG, FL 33702
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7901 4TH ST. N. STE 300 ST. PETERSBURG, FL 33702
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ss in Florida, enter the name of the
(Florida street	address)
New Registered Office Address:	, Florida
	ity) (Lip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of New Regi	stered 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 Alike Jones is listed as the V. There is a change, Alike 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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	I	JURDAN NGUYEN	11837 PADUA LANE
Add Remove			ORLANDO, FL 32827
2) Change Add	_\$_	JORDAN NGUYEN	ORLANDO, EL 32827
Add Remove Change Add			<u> </u>
Remove 4)ChangeAdd			
Remove 5) Change Add			
Change Add			

ach additional sheets. If necessary). (Be specific) A amendment provides for an exchange, reclassification, or cancellation of issued share visions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	- ·
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(if not applicable, indicate N/A)	
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(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	-
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	mrs.
(y not applicable, indicate N/A)	<u></u>
W/A	
	_

The date of each amendment(s) adopted date this document was signed.	on:	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory filing requirent of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes east for ent for approval.	the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each	d by the shareholders through voting groups. The f voting group entitled to vote separately on the ame	ollowing statement endment(s):
"The number of votes cast for th	ic amendment(s) was/were sufficient for approval	
by	··	
	(voting group)	
selected, by a	president or other officer – if directors or officers in incorporator – if in the hands of a receiver, trustouciary by that fiduciary)	have not been ec, or other court
	SEAN A. DICKERSON	
	(Typed or printed name of person signing)	
PIRECT	(Typed or printed name of person signing) OF PRESIDENT / CED (Title of person signing)	
	(Title of person signing)	