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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MEGAN MARISSA HARTSGROVE, P.A.

| Certificate of Status | 0 |
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Articles of Amendment to Articles of Incorporation of

| THE TRUBBLE HARTSGROVE, F.A. | |
|---|---|
| P21000091208 | ion as currently flied with the Florida Dept. of State) |
| | ment Number of Corporation (if known) |
| | a Statutes, this Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the co | orporation: |
| name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc. "chartered," "professional association," or the abbre | The new orporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word eviation "P.A." |
| B. <u>Enter new principal office address, if applicable</u> Principal office address <u>MUST BE A STREET ADD</u> | u DRESS) |
| | |
| P-4 | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) | &) |
| • | |
| | |
| . If amending the registered agent and/or registere | ed office address in Florida, enter the name of the |
| Hand He den Tepitteren o | Mice address; |
| Name of New Revistered Agent | |
| | |
| New Rental LOD | (Florida street address) |
| New Registered Office Address: | (City) , Florids (Zip Code) |
| | · (tap vote) |
| w Registered Agent's Signature, If changing Registered ovent Lo | dered Agent; am familiar with and accept the obligations of the position. |
| | |
| Signatu | ire of New Registered Agent, if changing |
| eck if applicable The amendment(s) is/are being filed pursuant to s. 607 | |

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 | PT | John Doc | |
|-------------------------------|-------|------------------|---------------------------|
| X Remove | Y | Mike Jones | |
| X Add | SY | Sally Smith | |
| Type of Action (Check One) | Title | Name | Address |
| 1) Change | ٧P | Jorge A. Alfonso | 300 Aragon Ave. Suite 210 |
| X Add | | | Coral Gables, FL 33134 |
| Remove | | | |
| 2) Change | | _ | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | _ | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| 2. If amending or adding addit (Attach additional sheets, if ne | ional Articles, enter change(s) cessary). (Be specific) | <u>here</u> : | |
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| F. If an amendment provides for implementing (If not applicable, indicate) | or an exchange, reclassifications the amendment if not containe N/A) | n, or cancellation of issued ined in the amendment lise | shares. Ui |
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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 file date) | |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing requirements, this date will partment of State's records. | ll not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add action was not required. | pted by the incorporators, or board of directors without shareholder action and | d shareholder |
| ☐ The amendment(s) was/were add by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval. | -1 |
| ☐ The amendment(s) was/were app must be separately provided for | proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | ,: 2: |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | : |
| by | | , , |
| | (voting group) | :: ර |
| Dated March 23, Signature | ar the | _ |
| selecte | dector president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court red fiduciary by that fiduciary) | |
| | Torge A. Alfonso | |
| | (Typed or printed name of person signing) | |
| | Vice President | |
| • | (Title of person signing) | |