Requestor's Name)	
Address)	
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, dances,	
City/State/Zip/Phone #)	<del> </del>
WAIT	MAIL
Business Entity Name)	
Document Number)	
. Certificates o	of Status
Filing Officer:	
	Address)  City/State/Zip/Phone #  WAIT  Business Entity Name)

Office Use Only



500379349605

# Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656:7953 www.incserv.com



## **ORDER FORM**

Florida Department of State

FROM

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 1/20/2022

**PRIORITY** Regular Approval

OUR REF\_#\_(Order\_ID#) 993218

ORDER ENTITY\_\_\_\_\_CRISTINA QUINTERO, P.A.

						/ICES	

CRISTINA QUINTERO, P.A. (FL)

File the attached amendment and provide a certified copy.

NOTES:\_

\$43.75 Authorized

### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and

Tuesday, February 1, 2022 Page 1 of I

courier package if applicable. For UCC orders, please include the thru date on the results.

# Articles of Amendment Articles of Incorporation of

Cristina Quintero, P.A.

(Name of Corporation as currently filed with the Florida Dept. of State) P22000000386 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its 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) New Registered Office Address: (City) 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

☐ 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	PT Joh	in Doe	
X Remove	<u>y</u> <u>Mil</u>	ke Jones	20
_X Add	SV Sal	ly Smith	2022 FEB
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Cristina Quintero	355 Alhambra Circle Suite 1450
x Add	<del></del>		Coral Gables, FL 33134
Remove			<u> </u>
2) Change			
Add			-
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter cha Attach additional sheets, if necessary). (Be specific)	<del></del>			
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f an amendment provides for an exchange, reclassif provisions for implementing the amendment if not	fication, or cancellation of	issued shares,		
(if not applicable, indicate N/A)	contained in the amendin	em itseit:		
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The date of each amendment(s) adoption:		if other ti	nan the
date this document was signed.			
Effective date if applicable:			
(no more than 90 days after amendment file date)			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	s, this date will no	t be listed	as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the incorporators, or board of directors without shareho action was not required.	older action and sha	ureholder	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	endment(s)		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment		2022 FEB	
"The number of votes cast for the amendment(s) was/were sufficient for approval	-ñ:	ᇊ	- 1
by"		N)	• • • • • • • • • • • • • • • • • • • •
(voting group)		<b></b>	
		2.1	•
Dated 1-20-2022		. <del></del>	,
Signature CAAA	•	ಯ	
(By a director, president or other officer - if directors or officers have n	tot been		
selected, by an incorporator – if in the hands of a receiver, trustee, or o	ther court		
appointed fiduciary by that fiduciary)			
CRISTINA QUINTERO			
(Typed or printed name of person signing)			
(N CORPORATOR			
(Title of person signing)			