P22000002410

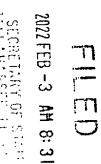
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: GAYLE CRICKET	HUFF PA			
DOCUMENT NUMBEI	R: <u>P22000002410</u>				
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.			
Please return all correspo	ndence concerning this mat	tter to the following:			
W	SCOTT PACETTI CPA				
	SCOTTACLITICIA	Name of Contact Person			
Co	owan & Pacetti Inc				
<u>.=-</u>		Firm/ Company			
32	75 US Highway 1 South				
		Address			
Sa	int Augustine				
		City/ State and Zip Code	?		
SC	ott@cowan-pacetti.com				
30	E-mail address: (to be us	sed for future annual report	notification)		
For further information c	oncerning this matter, pleas	se call:			
W SCOTT PACETTI		at (904) 824-8463		
·	Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amend Division P.O. B	g Address Iment Section on of Corporations ox 6327 assec, FL 32314	Street Address 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

FILED

GAYLE CRICKET HUFF PA	2022 FEB -3 AM 8: 31
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P22000002410	SECKETARY OF STATE TALLAHASSEE, PLACE
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
GAYLE MARKHAM HUFF PA	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses.	dress in Florida, enter the name of the
_	
Name of New Registered Agent NA	
(Florida	street address)
V. D. 100 (11)	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: with and accept the obligations of the position.
, nerco, decep, me appendix a g	
Signature of Man	v Registered Agent, if changing
Signature of New	region to again y sums a

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.

Example:

X Change	<u>PT</u>	<u>John Doe</u>						
X Remove	<u>y</u>	Mike Jones	<u>s</u>					
X Add	<u>sv</u>	Sally Smith	<u>h</u>					
Type of Action (Check One)	<u>Title</u>	<u>N</u>	ame			<u>Addres</u> s		
1) Change	-							
Add								
Remove							<u>.</u> .	
2) Change					···			
Add							_	_
Remove 3) Change		-						
Add								
Remove								
4) Change								
Add								
Remove								
5) Change				,				
Add								
Remove								
6) Change		- 			 -	- · · · · · · · · · · · · · · · · · · ·		
Add								
Remove								

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NA
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
NA
<u> </u>

The date of each amendment(s) adoption: 01/25/2022
date this document was signed.
Effective date if applicable: 01/25/2022
(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, this date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
Dated <u>01/25/2022</u>
Signature Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
GAYLE HUFF
(Typed or printed name of person signing)