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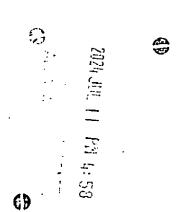
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: CANTRELL, AST	BURY, & KRANZ, P.A.	
DOCUMENT NUM	P22000051719		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Malinda Hayes		
		Name of Contact Persor	1
	Law Offices of Malinda L. H	layes	
		Firm/ Company	
	378 Northlake Blvd. #218	, ,	
		Address	
	North Palm Beach, FL 33408	}	
	<u> </u>	City/ State and Zip Code	2
	malinda@mlhlawoffices.com	1	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, please	se call:	
Malinda Hayes		561	
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CANTRELL, ASTBURY, & KRANZ, P.	Α.			
(Name o	f Corporation as current	ly filed with the Floric	da Dept. of State)	
P22000051719				
	(Document Number of	of Corporation (if know	n)	-
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpor	ation adopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
Cantrell Schuette, P.A.				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C" chartered," "professional association,"	orp," "Inc." or "Co".	A professional corpor	orated" or the abbreviation	1 "Corp.,"
B. Enter new principal office address, i (Principal office address MUST BE A ST		N/A	· ····	
			53	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		 024 JUJ
			-	<u></u>
			•	
D. If amending the registered agent an new registered agent and/or the new			the name of the	փ: 58
Name of New Registered Agent	N/A		6 D	
	(Florida st	reet address)		
New Registered Office Address:		(City)	, Florida(Zip Co	ode)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agen ered agent. I am familiar	t: with and accept the obj	ligations of the position.	
	Signature of New 1	Registered Agent, if cha	unging	
		G r right high sim	3 3	

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)

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 Remove X Add Type of Action (Check One) 1) Change	<u>V</u> <u>SV</u> <u>Title</u> Pres	Mike Jon Sally Sn		
Type of Action (Check One)	Title	Sally Sn	<u>ni1h</u>	
(Check One)				
1) Change	Deec		<u>Name</u>	Address
			Warren Astbury	
Add _X Remove				
2) Change	C00	_	Alissa Kranz	
Add Remove 3 J Change		_		
Add Remove 4) Change Add		_		
Remove 5) Change Add		_		
Remove 6) Change Add Remove		_		

/A	nal sheets, if necessary).	ticles, enter change(s) (Re specific)	here:		
	141 process, 17 receptury 7.	(De apecijie)			
					
	·				<u></u>
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lf an amendm	ent provides for an exc	hange, reclassification	n, or cancellation of iss	sued shares,	
provisions for	r implementing the am	change, reclassification endment if not contai	n, or cancellation of iss ned in the amendment	ued shares, itself:	
provisions for (if not app	ent provides for an exer implementing the am olicable, indicate N/A)	hange, reclassification endment if not contain	n, or cancellation of iss ned in the amendment	sued shares, itself:	
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provisions for	r implementing the am	change, reclassification	n, or cancellation of iss ned in the amendment	itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(n	o more than 90 days after amendment file date)
Note: If the date inserted in this block does not a document's effective date on the Department of Sta	neet the applicable statutory filing requirements, this date will not be listed as the te's records.
Adoption of Amendment(s) (CHEC	K ONE)
☐ The amendment(s) was/were adopted by the inco- action was not required.	orporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders was/were sufficient for appearance.	reholders. The number of votes cast for the amendment(s) roval.
	areholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of votes east for the amendm	ent(s) was/were sufficient for approval
by William Centrell (voting	group)
Dated 7/3/202	4
Signature	
	at or other officer – if directors or officers have not been erator – if in the hands of a receiver, trustee, or other court that fiduciary)
	William Contrell
(Туг	med or printed name of person signing)
	C20
(Titl	c of person signing)