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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Law Office of Mag	gda Lanza, PA				
DOCUMENT NUMBER	D22000072457					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ndence concerning this ma	tter to the following:				
		Magda Lanza				
		Name of Contact Perso				
	i	Law Office of Magda Lanz	a, PA			
		Firm/ Company				
		3095 N. Covington Dr.				
	·-·	Address				
		Deltona, FL 32738				
_	 	City/ State and Zip Cod	e			
		mlanza.law@gmail.com	1			
_	E-mail address: (to be us	sed for future annual report	notification)	_		
				دی ا ایس	202	
For further information c	oncerning this matter, plea	se call:		-12 15-12 15-12	بن پ	•
Magda Lanza		at (<u>386</u>	507-6625	- 153 - 153	2023 JAN 3 I	
Name of C	Contact Person	Area Co	de & Daytime Telephone N	umber	<u>-0</u>	,
Enclosed is a check for th	ne following amount made	payable to the Florida Dep	artment of State:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PH 4: 27	1
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)	[2]	22	
Amend Divisio P.O. Bo	g Address ment Section in of Corporations ox 6327 issee, FL 32314	Amend Division The C 2415	Address Ilment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 8 assee, Fl. 32303	310		

Articles of Amendment to Articles of Incorporation of

Law Office of Magda Lanza, PA

P22 000 073 457	of Corporation as currer	ntly filed with the Florida Dept. of State)			
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the fo	llowing :	amend	ment(s) to
A. If amending name, enter the new n	ame of the corporation:				
N/A			7	The n	17574,
	Torp," "Inc," or "Co".	"company," or "incorporated" or the abbr A professional corporation name must ."	eviation	"Corp) ''
B. Enter new principal office address,	if annlicable:	3095 N. Covington Drive			
(Principal office address MUST BE A S	Deltona, FL 32738				
					_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 390472			_
		Deltona, FL 32739			
				2 023	_
D. If amending the registered agent an				1A. 3	123422337
new registered agent and/or the new registered office addre		<u>ss:</u>			र्द इस्सुम्म्
Name of New Registered Agent	N/A		<u> </u>	<u> </u>	g = 0
				t : 2	
	(Florida :	street address)	- 11	2	
New Registered Office Address:	N/A Florida_				_
	(Cuy)		(Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the pos.	ition.		
, , , , , , , , , , , , , , , , , , , ,	8	and the second s			
,	Signatura of Nave	Registered Agent, if changing			
	ngnaunv og fren	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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		- ———	
Add			
Remove			

	ary). (Be specific)			
Α				
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If an amendment provides for an	exchange, reclassificat	ion, or cancellation of	issued shares,	
provisions for implementing the (if not applicable, indicate N/.	amendment if not con	tained in the amendme	ent itself:	
II not applicante maicate w	A)			
ty management much the two				
(g ma approximate mate are 14)				
	,			
/A				

	January 26, 2023	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirement Department of State's records.	is, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the am sufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendmen	
"The number of votes co	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
1/26/20] Dated	3	
Signature _=	Horyday -	
selec	director, president or other officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, or conted fiduciary by that fiduciary)	
	Magda Lanza	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	