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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Elizabeth Moses, P	.A.		crans U		
	MBER: 700400441937			choin		
	<i>les of Amendment</i> and fee are su	bmitted for filing.	W. C.	Jub		
Please return all co	rrespondence concerning this ma	tter to the following:	In Di			
	Elizabeth Moses					
		Name of Contact Person	n	-		
	Elizabeth Moses, P.A.					
		Firm/ Company				
	932 Blackberry Lane					
		Address		-		
	Saint Johns, Florida 32259					
		City/ State and Zip Cod	e	-		
	monreb2000@yahoo.com					
	E-mail address: (to be used for future annual report notification)					
	• • • • • • • • • • • • • • • • • • • •		•			
For further informa	tion concerning this matter, pleas	se call:				
Elizabeth Moses		904 at (545-4241			
Name of Contact Person		at (904) 545-4241 Area Code & Daytime Telephone Number		r		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		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



to

Elizabeth Moses, P.A.	2023 JAN 17	AH IO: 30
(Name of Corporation as currently	filed with the Florida Dept. of State)	** ***
Elizabeth Moses, P.A.	TÁL	737 H
(Document Number of	Corporation (if known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following ar	nendment(s)
A. If amending name, enter the new name of the corporation:		
Elizabeth Montgomery Moses, P.A.		ie new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A "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: new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	City) . Florida Zip Code	.)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was	ith 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) (c), 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 Change	<u>PT</u>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u>
1) Change		<u> </u>		
Add				
Remove				
2)Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

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f an amendment nrovi	des for an exch	ange, reclassific	ation, or cancell	ation of issued s	shares, r.	
i-i fil	enting the amer	nament ii not co	ontained in the ai	nenumem aser	<u>ı.</u>	
provisions for implem	indicate N/A)					
provisions for implem (if not applicable, i	indicate N/A)					
provisions for implem	indicate N/A)					
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	01/13/2023	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	/2023	
Effective date <u>if applicable</u> :		
	(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this bl document's effective date on the De		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors	s without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes ficient for approval.	s cast for the amendment(s)
	roved by the shareholders through voting group each voting group entitled to vote separately of	
"The number of votes cast (or the amendment(s) was/were sufficient for a	pproval
all shareholders		."
	(voting group)	
selected appointe	ector, president or other officer – if directors of by an incorporator – if in the hands of a received fiduciary by that fiduciary) Elizabeth M. Moses (Typed or printed name of person s	iver, trustee, or other court
		remme,
	President	

(Title of person signing)