Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000107111 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

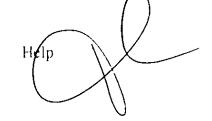
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
-------	----------	--	--	--

COR AMND/RESTATE/CORRECT OR O/D RESIGN MARY A. MARCONI, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35,00

Electronic Filing Menu Corporate Filing Menu



Articles of Amendment to Articles of Incorporation of

MARY A. MARCONI, P.A.	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P23000018232	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Mary Marconi, P.A	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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
, .	202
	2023 L'AR 21 11 0: 04
C. Enter new mailing address, if applicable:	₩ 12
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	0.
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addresses.	
	
Name of New Registered Agent	
(Elavida e	treet address)
	ir eer aan ess)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	
Signature of New	Registered Agent, if changing
Check if annicable	

 \square 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	<u>PT</u>	John Do	<u>)c</u>	
X Remove	¥	Mike Jo	ones	
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				2023 FAR 21 6:110: 0
Remove				55.00
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
6) Change		_		
Add				
Remove				

	(Be specific)	
<u> </u>		
		,,, ,,
		,
·		
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares	<u>s,</u>
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	

	March 21, 2023	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will sartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted action was not required.	ited by the incorporators, or board of directors without shareholder action and	shareholder 023
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	2023 HAR 2 1 - KH 10: O4
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	A1 10
"The number of votes cast for	or the amendment(s) was/were sufficient for approval): 0,
by	(voting group)	<u> </u>
March 21, 20	023	
(Bya din selected,	de Lopez ector, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	_
J	ade Lopez	
_	(Typed or printed name of person signing)	
,	Attorney-in-fact for MARY A. MARCONI, Director	
_	(Title of person signing)	