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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COF	RPORATION: Michael A. Moulto	on P.A.		
DOCUMENT N	P23000059653			
The enclosed Art	icles of Amendment and fee are su	bmitted for filing.		
Please return all o	correspondence concerning this ma	atter to the following:		
1,	Jacob A. Gelber			
•		Name of Contact Persor	1	
	Barnes Walker, Goethe, Perr	on, Shea & Robinson, PLL	С	
		Firm/ Company		
	1776 Ringling Blvd			
i.	····	Address	· · · · · · · · · · · · · · · · · · ·	
	Sarasota, FL 34236			
	 	City/ State and Zip Code	2	
	michaelmoulton@michaelsa	unders com		
		sed for future annual report	notification)	
For further inforr	nation concerning this matter, plea	se call:		
Jacob A. Gelber		941 at (556-5999	
N	ame of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fi	ce □\$43.75 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)	
	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

Michael A. Moulton P.A.				
(Name of Corpora	ition 25 currently filed w	vith the Florida Dep	t. of State)	
P23000059653				
(Doc	ument Number of Corpor	ation (if known)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Florida</i> .	Profit Corporation a	dopts the following	amendment(s) to
A. If amending name, enter the new name of the	corporation:			
N/A				The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered." "professional association," or the abl	ic," or "Co". A projes	y," or "incorporated" sional corporation n	or the abbreviation came must contain	"Corp.," the word
B. Enter new principal office address, if applica	N/A			
(Principal office address MUST BE A STREET A	DDRESS)		<i>€</i> 7	2021
				Se Ti
				
C. Enter new mailing address, if applicable:	NT/A		19	-ω [
(Mailing address MAY BE A POST OFFICE	BOX)	· 	<u>\$</u>	
,			in ∾ Lu⊥u	
				2
				<u> </u>
D. If amending the registered agent and/or regis	stered office address in I	Florida, enter the na	me of the	
new registered agent and/or the new register	ed office address:			
Name of New Registered Agent				
-	(Florida street addre	255)		
100 111			. Florida	
New Registered Office Address:	(City)		(Zip C	ode)
New Registered Agent's Signature, if changing I	Registered Agent:	d account the obligation	ne of the position	
I hereby accept the appointment as registered agen	nt. Lam jamunar wun and	a accept the ootigation	ns of the position.	
S	ignature of New Registere	ed Agent, if changing		
Cl. 1 (f Harly				
Check if applicable The amendment(s) is/arc 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 us an Add.

Example: XChange	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
	<u>sv</u>	Sally S		
Type of Action	Title		Name	<u>Addres</u> s
(Check One) 1) Change	VTS		Katherine K. Moulton	505 S Orange Ave #1501
x Add		_		Sarasota, FL 34236
Remove				
2) Change				
Add				
Remove Change		<u>.</u>		
Add				
Remove				
4)Change		_		
Remove				
5) Change		_		
Add				
Кето vc				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	
If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicale N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

	October 22, 2024		, if other than the
The date of each amendment(s) adoption: date this document was signed.			
Effective date <u>if applicable</u> :	ing more than 90	days after amendment fi	le date)
	•	•	
Note: If the date inserted in this block doe document's effective date on the Departmen	es not meet the application of State's records.	able statutory filing requ	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by action was not required.	the incorporators, or b	oard of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The for approval.	number of votes cast for	the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each vo	y the shareholders thro ting group entitled to	ough voting groups. The wote separately on the an	fallowing statement endment(s):
"The number of votes cast for the a	amendment(s) was/wo	re sufficient for approval	
by			•
	(voting group)		
October 22, 2024			
Dated	had A	. Merell	
(By a director,) selected, by an	president or other offic incorporator – if in the ciary by that fiduciary)	er - if directors or office c hands of a receiver, trus	rs have not been ntee, or other court
Michae	el A. Moulton		
	(Typed or printed	name of person signing)	
Preside	ent		
	(Title of person sig	ming)	