Electronic Filing Cover Sheet

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.

(((H23000415367 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 : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Fax Number : (561)214-8442

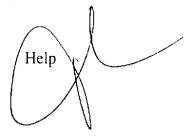
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	
CIIIdal	Auuress:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN HART LAW GROUP, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



→ 18506i76380 pg 2 of 5

Articles of Amendment to Articles of Incorporation of

Hart Law Group, P.A.		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P23000082819		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
Hart Law Firm, 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.	A professional corporation name must	previation "Corp.," contain the word
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2
		023
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		0
(Mailing address MAI BE A FOST OFFICE BOA)	··	C=1-3
	· · · · · · · · · · · · · · · · · · ·	
		7.3
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the	7 0
new registered agent and/or the new registered office address		
Name of New Registered Agent		
and and the first of the section of		
(Florida s	treet address)	
New Registered Office Address:	, Florida	
HER REgistered Office Made ess.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	nt: with and accept the obligations of the po	sition.
	, , , ,	
Cimon of No.	Parietanal Arent il abancino	
Signature of New	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)

_ Remove

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.

<u>X</u> Change	<u>PT</u>	John D	<u>oe</u>			
X Remove	Y	Mike Jo	ones			
X Add	<u>sv</u>	Sally S	<u>mith</u>			
Type of Action (Check One)	Title		Name	<u>Addres</u> s		
l) Change	-			 	272	
Add					2023 DEC	C-17
Remove					<u> </u>	eres Est
2) Change		_		 	ربه مسئل	, ,
Add					SHEEL PL	, 9
Remove 3) Change		_		 	<u> </u>	, 1
Add						
Remove						
4) Change				 	····	
Add						
Remove						
5) Change				 		
Add						
Remove						
6) Change		_		 		
Add						

amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)					
						
- , -						
						
						20\$3 DEC -6
						23(
					<u> </u>	贵
					<u> </u>	1
			······································		75	<u> </u>
					اري. ماريد	<u>ب</u> ء
					ية ت	ځ ،
						_
				·		
an amendment provides for an exch	rongo roelossific	stion or cancal	lation of issued	eharar		
provisions for implementing the ame	ndment if not co	ntained in the a	mendment itsel	<u>f:</u>		
(if not applicable, indicate N/A)						
					 	
					···-	

The date of each amendment(s) a date this document was signed.	doption:	, 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 E	block does not meet the applicable statutory filing requirements, this date we partment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	2023
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	2023 DEC -6 AM 9: 1
	for the amendment(s) was/were sufficient for approval	NS: B
by	(voting group)	NSSEE, FE
12/05/202 Dated	3	, , 0.
Signature	The	
selecte	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)	
	Ariana Turoski	
	(Typed or printed name of person signing)	
	Special Secretary	
	(Title of person signing)	