72400016579

(Re	equestor's Name)	-
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Kyle A. Hacias P.A. OF CORPORATION: P24000016579 IENT NUMBER:					
DOCUMENT NUM						
The enclosed Articles	les of Amendment and fee are submitted for filing.					
Please return all corre	spondence concerning this mat	lence concerning this matter to the following:				
	Kyle Hacias	• • • • • • • • • • • • • • • • • • •				
	Kyle A. Hacias P.A.	Name of Contact Person	1			
	25900 Hickory Blvd #102	Fілп/ Company				
	Bonita Springs, FL 34134	Address				
		City/ State and Zip Code				
	kyle.hacias@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:		ر ۲		
Kyle Ho	4 Ci 95	at (23%	120 -3444			
Name	of Contact Person	Area Coo	de & Daytime Telephone	Number		
Enclosed is a check for	or 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Am Div P.C	iling Address pendment Section rision of Corporations D. Box 6327 lahassec, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite ssee, FL 32303	810		

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Florida De	pt. of State)
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	i	
NIA		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 professional corporation	" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>)	ИД	
		,
		 -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
(maining duaress MAT BE A FOST OFFICE BOA)		: '
		35
D. If amending the registered agent and/or registered office a		ame of the
new registered agent and/or the new registered office add	T <u>(585;</u>	
Name of New Registered Agent N A		
(Florida	a street address)	
New Registered Office Address:		_, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent. I am famili		ons of the position.
Signature of Ne	w Registered Agent, if changing	
Cheek if annimable		
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.

Example: X Change	<u>PT</u>	John Do	€		
X Remove	<u>v</u>	Mikę Jo	<u>ies</u>		
_X Add	SY	Sally Sn	ith		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	P	_	Kyle Hacias	· 	25900 Hickory Blvd #102 Bonita Springs, FL 34134
Add					
Remove					
2) Change					. ,
Add					
Remove Change		_			
Add					
Remove					
4) Change		_			36
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add					

4/		
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		· = 36
orovisions for impleme (if not applicable, in	es for an exchange, reclassification, or cance nting the amendment if not contained in the addicate N/A)	llation of issued shares, amendment itself:
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
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4/19/24

_, if other than th	<u></u>	tion:	The date of each amendment(s) addate this document was signed.
	 .		Effective date <u>if applicable</u> :
	date)	(no more than 90 days after amendment file a	
not be listed as th	ements, this date will	k does not meet the applicable statutory filing requirer tment of State's records.	Note: If the date inserted in this blocument's effective date on the Dep
		(CHECK ONE)	Adoption of Amendment(s)
shareholder	nareholder action and s	d by the incorporators, or board of directors without sha	■ The amendment(s) was/were adoption was not required.
	ne amendment(s)	d by the shareholders. The number of votes cast for the cient for approval.	☐ The amendment(s) was/were adop by the shareholders was/were suf
		red by the shareholders through voting groups. The followh voting group entitled to vote separately on the amend	
		the amendment(s) was/were sufficient for approval	Kyle Hacias
		(voting group)	by
		7	
	•-		4/19/24
<i>t</i> 5			Dated
rs U:	•		1/
<u></u>	1 11 1	M + agan	Signature
	nave not been	for, president or other officer – if directors or officers he y an incorporator – if in the hands of a receiver, trustee.	
 . ω		fiduciary by that fiduciary)	
<u> </u>		le Hacias	
		** ************************************	· · · · · · · · · · · · · · · · · · ·
		(Typed or printed name of person signing)	-
			1
		(Typed or printed name of person signing) orporator	-

(Title of person signing)