

P30175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

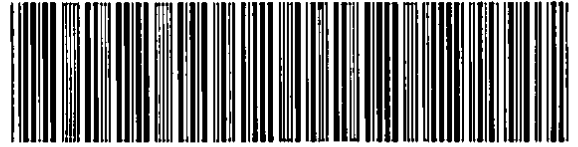
(Document Number)

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CLERK OF SUPERIOR COURT
DIVISION OF CORPORATE &
REAL ESTATE

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APR 08 2020

S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MIZE, HOUSER & COMPANY, PROFESSIONAL ASSOCIATION

Name of Corporation

DOCUMENT NUMBER: P30175

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brad Owen

Name of Contact Person

Mize CPAs Inc.

Firm/Company

534 S Kansas Ave., Suite 700

Address

Topeka, KS 66603

City/State and Zip Code

bowen@mizecpas.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brad Owen

at (785) 233-0536

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|--|---|---|

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

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

P30175

(Document number of corporation (if known))

1. MIZE, HOUSER & COMPANY, PROFESSIONAL ASSOCIATION

(Name of corporation as it appears on the records of the Department of State)

2. Kansas

(Incorporated under laws of)

3. 10/30/1992

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 01/17/2020

5. Mize CPAs Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

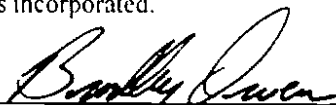
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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Bradley Owen

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

FILING FEE \$35.00

STATE OF KANSAS
OFFICE OF SECRETARY OF STATE

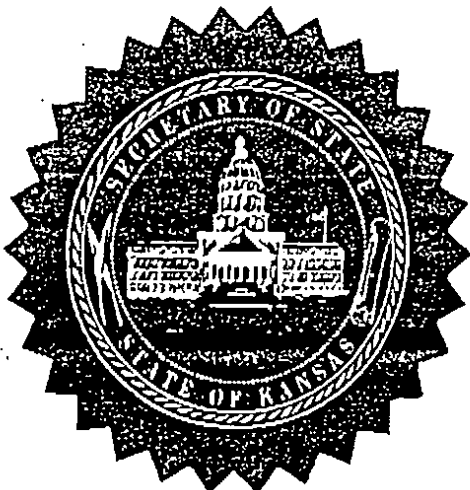
I, SCOTT SCHWAB, Kansas Secretary of State, certify that the records of this office reveal the following:

That MIZE HOUSER & COMPANY P.A. is a regularly and properly organized professional association under the laws of the state of Kansas, having been incorporated in Kansas on the 31st day of January, A.D., 1979.

I FURTHER CERTIFY that a certificate of amendment was filed in this office January 13, 2020 changing the corporate name from MIZE HOUSER & COMPANY P.A. to MIZE CPAs INC. and amending from a Kansas professional association to a Kansas for profit corporation.

I DO FURTHER CERTIFY that MIZE CPAs INC. is in good standing, having fully complied with all requirements of this office.

In testimony whereof:
I hereto set my hand and cause
to be affixed my official seal.
Done at the City of Topeka,
this 11th day of March, A.D., 2020.



Scott Schwab

SCOTT SCHWAB
KANSAS SECRETARY OF STATE