92000006298

•
(Requestor's Name)
•
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL

(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



000258398610

04/03/14--01018--014 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Lavin Law	Group, P.A.	
	BER: P9200000629		
	s of Amendment and fee are su		
Please return all corr	espondence concerning this ma	atter to the following:	
	Valerie Catalano		
		Name of Contact Perso	en .
	Lavin Law Group		
		Firm/ Company	
	2699 Stirling Roa	nd, Suite B100	
		Address	
	Ft. Lauderdale, F	L 33312	
		City/ State and Zip Coo	le
VCa	atalano@lavinlawy	ers.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Valerie Catalano		at (954	, 967-2788
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently t	<u>filed with the Florida Dept.</u>	of State)	
292000006298			
(Document Number o	f Corporation (if known)		
ursuant to the provisions of section 607.1006, Florid s Articles of Incorporation:	da Statutes, this Florida Profi	it Corporation adopts the fo	ollowing amendment(s) to
. If amending name, enter the new name of the c	orporation:		
			The new
ame must be distinguishable and contain the woi Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	o," "Inc," or "Co". A prof	y," or "incorporated" or essional corporation name	the abbreviation must contain the
Enter new principal office address, if applicable rincipal office address MUST BE A STREET ADI			
Enter new mailing address, if applicable:		·	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
			
If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florid of fice address:	a, enter the name of the	
Name of New Registered Agent			APR 人
	(Florida street address)		X OF STA
New Registered Office Address:		Florida	
	(City)	(Zip Co	de)
www.Registered.Agent's Signature, if changing Regereby accept the appointment as registered agent.		ot the obligations of the pos	ition.

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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PT	Samuel D. Navon	
Add			
Remove			
2) Change	PTS	Andrew T. Lavin	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>additional</i>	dding additional Ar sheets, if necessary).	(Be specific)			
			<u></u>		
. <u></u>					
·-					
					
	·				
			-		·
					
in amendment i	provides for an excl	nanna raclossifica	tion or concellation	on of iceuad charge	
<u>ovisions for im</u>	plementing the ame	ndment if not con	tained in the ame	dment itself:	
(if not applica	able, indicate N/A)				
					
					
·					
		<u>.</u>	·		

The date of each amendment(s) adoption: February 28, 2014	, if other than the
date this document was signed.	
Effective date if applicable: February 28, 2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_03/31/14	
Signature Quelow Jan, PRES.	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Andrew T. Lavin	
(Typed or printed name of person signing)	
President	
(Title of person signing)	