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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: CHOROWSKI &	CLARY, P.A.				
	P93000068971			_		
The enclosed Article	es of Amendment and fee are su	abmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	MIKE CHRISTIANSEN					
	<del></del>	Name of Contact Perso				
	Mastriana & Christiansen PA		···			
		Firm/ Company	<del></del> -	<del></del>		
	1500 N. Federal Highway	,				
		Address				
	Ft. Lauderdale FL 33304	Address				
		City/ State and Zip Coo	le			
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m	ike@m-c-law.com				2023	
	E-mail address: (	to be used for future annua	al report notification)		£EB	1.77
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For further informat	ion concerning this matter, plea	se call:			-6 PM	
Mike Christiansen	_	954 at (	397-9550	١	~	2.2
Name	e of Contact Person	Area Co	ode & Daytime Telephone N	Jumber :	_ 64	
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:	1 4	_	
■ \$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 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

CHOROWSKI & CLARY, P.A.

Check if applicable

 $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

(Name of Corporation as o	<u>currently fil</u>	ed with the Flo	<u>rida Dept. of Sta</u>	<u>:te</u> )		
P93000068971						
(Document No	lumber of Co	rporation (if kno	own)			
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	ites, this <i>Floi</i>	rida Profit Corp	oration adopts the	e followin	ig ame	ndment(s
A. If amending name, enter the new name of the corpora	ation:					
CHOROWSKI CLARY SAOJI EPSTEIN, P.A.					The	new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp." "Inc," or " "chartered," "professional association," or the abbreviation	"Co". A pr				on "Ca	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u>s</u> )					
			<del></del>			
C. Enter new mailing address, if applicable:						
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	_			,	202	
	_				23-	ETELTIA
	-		<del></del>		6	<u> </u>
D. If amending the registered agent and/or registered off	fice address	in Florida, ente	er the name of th	e : 55	9	er anner er G
new registered agent and/or the new registered office				- //		
Name of New Registered Agent					ထ္	
				7.1	6 <del>1</del> 1	
	lorida street d	iddress)			-	
New Registered Office Address:			, Florid	a		
	(Cit	N)		(Zip)	Code)	
New Registered Agent's Signature, if changing Registered	d Agent:					
I hereby accept the appointment as registered agent. I am fo		and accept the o	obligations of the	position.		
Sionature o	of New Regis	tered Agent, if c			_	

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	<u> 74</u>	John Doe	
X Remove	V	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Damento			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NM)	acu aaatnonat sneets, tj n	necessary). (Be speci	fic)			
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	JANUARY 1, 2023	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	JANUARY 1, 2023	
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must he separately provided for	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were acaction was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated \ \ 2	01/2023	
Signature	= (N) MX ·	
select	director, president or other officer if directors or officers have not been ted, by an incorporator if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	RAE CHOROWSKI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	