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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone #)	
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Thomas R. Olsen PA DOCUMENT NUMBER: P94000026339 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tom Olsen Name of Contact Person Thomas R. Olsen PA Firm/ Company 2518 Edgewater Dr. Address Orlando, FL 32804 City/ State and Zip Code tom@olsenlawgroup.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (321) 203-0093

Area Code & Daytime Telephone Number Tom Olsen Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

Thomas R.Olsen, P.A.

Thomas IV, Olsen, T.A.	
(Name of Corporation as curren	tly filed with the Florida Dept, of State)
P94000026339	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Olsen Law Group.com PA	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	
(Florida s	treet 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 familian	nt: with and accept the obligations of the position.
Signature of New	Revistered Agent, if changing

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>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
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4) Change				
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5) Change				
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6) Change				
Add				
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	ding additional Artheets, if necessary).	(Be specific)	_		
					
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an amendment i	provides for an exc	hange, reclassifi	cation, or cancell	ation of issued sha	res.
provisions for i <u>m</u>	plementing the am	endment if not c	ontained in the ar	nendment itself:	
/// 10	uble, indicate N/A)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
	no more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed as the ate's records.
Adoption of Amendment(s) (CHE	<u>CK ONE)</u>
■ The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	areholders. The number of votes cast for the amendment(s) proval.
	hareholders through voting groups. The following statement coup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	ment(s) was/were sufficient for approval
by	g group)
tvotin	g group)
action was not required.	ard of directors without shareholder action and shareholder
Li The amendment(s) was/were adopted by the in action was not required.	corporators without shareholder action and shareholder
September 11, 2018 Dated Signature	MAAAA
	or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court
appointed fiduciary l	
Thomas R.	
(1)	vped or printed name of person signing)
President	
	(Title of person signing)

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