

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : ADAM R. SCHIFFMAN, P.A.
Account Number : I20000000100
Phone : (305) 682-1328
Fax Number : (305) 682-0063

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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10 SEP 30 PM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
ADAM R. SCHIFFMAN, P.A.**

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ADAM R. SCHIFFMAN, P.A.

DOCUMENT NUMBER: P94000072312

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ADAM R. SCHIFFMAN, ESQUIRE

(Name of Contact Person)

ADAM R. SCHIFFMAN, P.A.

(Firm/ Company)

2750 N.E. 185 STREET, SUITE 201

(Address)

Aventura, Florida 33180

(City/ State and Zip Code)

For further information concerning this matter, please call:

Adam R. Schiffman, Esquire

(Name of Contact Person)

at (305) 682-1328

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
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enclosed)

☐ \$52.50 Filing Fee
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is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

ADAM R. SCHIFFMAN, P.A.

(Name of corporation as currently filed with the Florida Dept. of State)

P94000072312

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

THE SCHIFFMAN LAW GROUP, P.A.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 SEP 30 PM 2:11

The date of each amendment(s) adoption: September 30, 2010

Effective date if applicable: Upon Filing
(no more than 90 days after amendment file date)

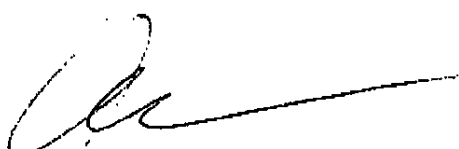
Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were approved 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.

Signature


(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)

ADAM R. SCHIFFMAN, ESQUIRE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35