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R. WATE

## **COVER LETTER**

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TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION: Jocely	in E. Lowthe	P.A.
DOCUMENT NUMBE	R: <u>P950000</u>	5 6383	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
- -	Jocel.	Name of Contact Person  In F. Lowth  Firm/ Company  Dempsey  Address	er, P.A.
_			rida 3293/
	E-mail address: (td be us	Dac CF1. Y Sed for future annual report	notification)
	concerning this matter, pleas	١	, 784-8586
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	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)
<u>Mailir</u>	ng Address	Street	Address

Amendment Section

Clifton Building

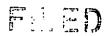
Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## **Articles of Amendment** to

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	Articles of Incorporation of	2019 MAR -6	PM 12: 35
Jocelyn E.	Lowther P.A.	Dept. of State)	A PLATE
P950000063		· · · · · · · · · · · · · · · · · · ·	
	ument Number of Corporation (if known	)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corpora	tion adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the will "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "Co". A professional c		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		Beach ,	Dr. M.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B		Jaga fice Box Beach 326	31 321306 Florida 332
D. If amending the registered agent and/or regist new registered agent and/or the new registered		ne name of the	
Name of New Registered Agent			
New Registered Office Address: 419  New Registered Agent's Signature, if changing R  I hereby accept the appointment as registered agent.	egistered Agent:	(.	Zip Code)
	gnature of New Registered Agent, if char	eging	

## 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 <math>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	change	
X Remove	<u>v</u>	Mike Jones	No change of officers	
X Add	<u>sv</u>	Sally Smith	of officer	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	• •	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				-
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

eArticle	IL PRINCIPLE OFFICE
	Cocoa Beach, Florida 32931
amend th	LE III escord sertence to add to them end of the
	w mediators
Arend Act	ca Black, Florida 32931
is the H	ich VI to read The purpose of this forpurndering of those services of a certified and appointed traffic hearing Officer.
. If an amendment provisions for im	provides for an exchange, reclassification, or cancellation of issued shares, plementing the amendment if not contained in the amendment itself:  while, indicate N/A)

The date of each amendment(s) adoption:	_, if other than
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will neclarate to the Department of State's records.	ot be listed as
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)	
(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 3 4 19  Signature (By a director, resident or other officer – if directors or officers have not been	-
selected, by artincorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Tocelyn E. Lowth el (Typed of printed name of person signing)	
(Title of person signing)	

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