## 96000036047

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone #	)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	)		
(Document Number)				
Certified Copies	_ Certificates o	f Status		
Special Instructions to	Filing Officer:			

Office Use Only



400262396124

07/18/14--01023---008 \*\*35.00

JUL 3 1 2014 C. CARROTTE

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Locklin & Saba, P.A. DOCUMENT NUMBER: P96000036047 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Oscar Locklin Name of Contact Person Locklin & Saba, P.A. Firm/ Company 4557 Chumuckla Hwy. Address Pace, FL 32571 City/ State and Zip Code olocklin@ljslawfirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850 ) 995-1102
Area Code & Daytime Telephone Number Oscar Locklin Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## Locklin & Saba, P.A.

14 JUL 18 PM 2: 26

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

P96000036047

(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:

A. If amending name, enter the new name of the corporation:

Locklin, Saba, Locklin & Jones, P.A.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent

(Florida street address)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

New Registered Agent's Signature, if changing Registered Agent:

new registered agent and/or the new registered office address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Angela J. Jones	4557 Chumuckla Hwy.
Add			Pace, FL 32571
Remove			
2) Change	<u></u>	Angela J. Jones	4557 Chumuckla Hwy.
Add			Pace, FL 32571
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
Kemove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<del></del>
If an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·
	7.0

The date of each amendment (date this document was signed.	(s) adoption: July 17, 2014	, if other thar
-	July 17, 2014	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wern by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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 action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated		
Signature (P	y a director, president or other officer – if directors or officers have not been	
se	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Jack Locklin, Jr.	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	

the