

P960000073348

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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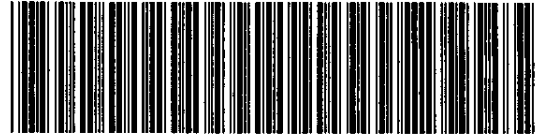
(Business Entity Name)

(Document Number)

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800253149588

*Name Change  
& Amend*

10/30/13--01028--009 \*\*25.00

35.00

FILED  
2013 OCT 30 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DR*  
*11/5/13*

*\* 00789, 02846, 00671*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Ricardo A. Gonzalez & Associates, P.A.

DOCUMENT NUMBER: P96000073348

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

Please return all correspondence concerning this matter to the following:

Ricardo A. Gonzalez, Esq.  
Name of Contact Person

Firm/ Company  
8750 NW 36 Street, Suite 425  
Address

Miami, Florida 33178  
City/ State and Zip Code

ricardo@glflaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline Lage at ( 305 ) 5918844  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**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

GONZALEZ  LAGE  
ATTORNEYS AT LAW

November 5, 2013

VIA EMAIL: ANNETTE.RAMSEY@DOS.MYFLORIDA.COM

Ms. Annette Ramsey  
Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Gonzalez Lage, PL, Document #L13000071857, LC Voluntary Dissolution filed  
10/30/13; and  
Ricardo A. Gonzalez & Associates, PA, Document #P96000073348, Amendment  
for Name Change to Gonzalez Lage, P.A.

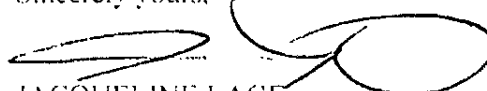
Dear Ms. Ramsey,

In accordance with your telephone conversation today with my assistant Pattie Royo,  
please accept this letter as confirmation that we will not be revoking our dissolution to the name  
Gonzalez Lage, PL.

I hereby release the use of the name Gonzalez Lage for the purposes of processing the  
amendment filed for name change of Ricardo A. Gonzalez & Associates, P.A. to Gonzalez Lage,  
P.A.

Please feel free to contact me or Pattie if you require any additional information or have  
any questions, comments or concerns.

Sincerely yours,



JACQUELINE LAGE  
Manager

/PR

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2018 OCT 30 PM 5:00

Ricardo A. Gonzalez & Associates, P.A.

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P96000073348

(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:**

Gonzalez Lage, PA

*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**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

*Name of New Registered Agent* \_\_\_\_\_

\_\_\_\_\_  
(Florida street 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 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                    PT     John Doe

X Remove                    V       Mike Jones

X Add                         SV     Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D, V</u>	<u>Jacqueline Lage</u>	<u>8750 NW 36 Street, Suite 4</u> <u>Miami, Florida 33178</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

425



The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: November 1, 2013  
*(no more than 90 days after amendment file date)*

**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)*

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 10/28/2013

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)*

Ricardo A. Gonzalez

*(Typed or printed name of person signing)*

Director/ President

*(Title of person signing)*