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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: JACKSOH	KIRSCHNER A	PCHITECTS & ASSOCIATES, P.
DOCUMENT NUN	IBER: P960001	00020	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ANDREW KI	ZSCHNER	
		Name of Contact Person	1
	JAUKSON KIRS	CHNER ARCH	ITECTS & ASSOC., PA.
		Firm/ Company	•
	1435 HIGHLAN	o avehue	
		Address	
	1435 HIGHLAND MELBOURNE	FLORIDA 3	2935
		City/ State and Zip Cod	e
the sales at the sales are at	E-mail address: (to be us		chner.com notification)
For further informati	on concerning this matter, pleas	se can:	
AHDREIN	KIRSCHHER	at (_321	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.o	ailing Address nendment Section vision of Corporations ), Box 6327 Hahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahussee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## FILED

Articles of Amendment to Articles of Incorporation of

2022 SEP - 1 PM 12: 17

JACKSON KIRSCHNER ARCHITECTS & ASSOCIATES, P.A.
(Name of Corporation as currently filed with the Florida Dept. of State) [ALLAHASSE]
P96000100020
(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:
ANDREW S. KIRSCHNER ARCHITECT, 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)
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 Agen: DAYID LARKIN
1900 HILKORY ST. SUITE A (Florida stree) address)
New Registered Office Address: MELBOURNE , Florida 3290 (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

Check if applicable

The amendment(s) is/arc being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

Example:

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.

X Change	<u>PT</u> <u>John I</u>	<del>)ac</del>	
X Remove	<u>V</u> <u>Mike J</u>	lones	
X Add	<u>SV</u> <u>Sally S</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PT	DAVID JACK-SON	10850 S. TROPICAL
Add Remove 2) Change Add	77	ANDLEID KIRSCHNEL	TRAIL MERRYTT. ISL. FLORIDA, 32952 9 SPWNAKER PT. CT 1HB. FLORIDA 32937
Remove 3 ) Remove — Add			
Remove 4)ChangeAdd			
Remove 51ChangeAdd			
Remove 61 Change Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
	N/A	
If an amandment provider for an each	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	. 1	
· · · · · · · · · · · · · · · · · · ·		
		-
· <del>-</del>		

The date of each amendment(s) ac	option:		_, if other than the
kate this document was signed.			
Effective date if applicable:	OCTOBER 1 ST	2022	
	(no more than 90 days after an	nendment file date)	
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory partment of State's records.	tiling requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of direct	ors without shareholder action and :	shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of vo flicient for approval.	otes cast for the amendment(s) $oldsymbol{arphi}$	20
must be separately provided for "The number of votes cast	roved by the shareholders through voting greach voting group entitled to vote separately for the amendment(s) was/were sufficient to the amendment(s) was/were sufficient to the through the sufficient for the amendment(s) was/were sufficient to the same sufficient for the amendment(s) was/were sufficient to the same sufficient to the same sufficient for the same sufficient to the same suf	v on the amendment(s):	SEP -1 PH 12: 17
selected	West Multure rector, president or other officer - if director I, by an incorporator - if in the hands of a re- ed fiduciary by that fiduciary)  ANDARM KI  (Typed or printed name of person	eceiver, trustee, or other court	
-	CEO/OWNER		<del></del>
	(Title of verson signing)		

•