Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210004039323)))



H21000403B323ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

_		
7	\sim	•

Division of Corporations

: (850)617-6380

From:

Account Name : LEVIN LAW & MEDIATION GROUP

Account Number : 120140000093

Phone Fax Number : (941)953-5300 : (941)953-5355

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN LISA B. CICERO, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Y SULKER Help 1 6 2021

H21000403932 3

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Lisa B. Cicaro, P.A	<u>. </u>	
DOCUMENT NUMB	ER: <u>P97000001466</u>	·•	
The enclosed Articles	of Amendment and foo are su	bmitted for filing.	į
Please return all corres	pondence concerning this ma	tter to the following:	
	Lisa B. Malamud	•	
•		Name of Contact Person	1
	Levin Law		
•		Pirm/ Company	i
	5220 Simset Drove		i
•	VALUE OF THE PROPERTY OF THE P	Address	
	14in		Ì
-	Miami, FL 33143	City/ State and Zip Code	1
-	liss@levinmediation.com		
	E-mail address: (to be u	ed for future annual report	notification)
			i
For further information	concerning this matter, pleas	eo call:	
Via D. Malanas I		. ===	:
Lies B. Malamud	f Contact Person	at (786	de & Daytime Telephone Number
NEIDG O	1 Contact 1 dison	ALTHI CO	ne or Dayanne Totophone Huntings
Enclosed is a check for	the following amount made	payable to the Florida Depe	artment of State:
П *	(Taux 54 7 11 1 7 1 4 1	—	5
S35 Filing Fco	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee &	☐\$52.50 Filing Fee Certificate of Status
	Certificate of Status	Certified Copy (Additional copy is	Certified Copy
		(Auditional copy is	(Additional Copy
		emmosed)	is enclosed)
	ing Address		Address
Amendment Section			ment Section
Division of Corporations		Division of Corporations	
P.O. Box 6327 The Centre of Tallahassoo			
Tallahassoo, PL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

H21000403932 3

Articles of Amendment to Articles of Incorporation of

Name	of Corporation as currently filed	with the Florida Dept. of State)		
ISA B. Cicero, P.A.		į		
	(Document Number of Corpo	ration (if known)		
tursuant to the provisions of section 507 is Articles of Incorporation:	.1006, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the folio	wing amendmen	at(s) to
L If amending name, enter the new n	same of the corporation:			
"isa B. Malamud, P.A.			6 7	
ame must be distinguishable and contai 'inc.," or Co.," or the designation " chartered," "professional association,	COTD." "INC." OF "Co". A profes	y," or "incorporated" or the abbrev isional corporation name must oo.	The new istion "Corp.," mission the word	
i. Enter new principal office address. Principal office address <u>MUST BE A S</u>	if applicable:			
		<u>:</u>		
Enter new mailing address. If appl (Mailing address MAY BE A POST	icable: OPP(CE BOX)			70
				<u>22</u> 22
 If amending the registered agent are new registered agent and/or the new 	nd/or registered office address in F w registered office address:	lorida, enter the name of the		یر. ا نا
Name of New Registered Agent			100	<u> </u>
	5220 Sunset Drive		157	ا ف
	(Florida street addre	(1)	- - A	<u>5</u>
New Registered Office Address:		, Florida <u>3314</u>		
	(City)	(2	ip Code)	
ew Registered Agent's Signature. If a hereby accept the appointment as registered by accept the appointment as registered by the applicable is applicable.	hanging Registered Agent: ered agent. I am familiar with and Signature of New Registered		ત .	
The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11) (s). F.S.	l I		

_ Romovo

H21000403932 3

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 Doc 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 John Dos ET X Remove Y Mike Jones X Add <u>VR</u> Sally Smith Type of Action Title Address Nama (Check One) 1) ____ Change D Lisa B, Malamud 5220 Sunset Drive X___ Add Mjami, Fl 33143 ____ Remove 2) ____ Change Lisa B. Cipero 5220 Sunset Drive Add Mlami, FL 33143 x Romove 3) ____ Change ____ **A**dd __ Remove 4) ____ Change ___ Add Remove 5) ____ Change _ Add Remove o) ____ Change ___ Add

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	H2100040393
	· .
	
If an amendment provides for an exchange, reclassification, or cancellation of invest shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	
	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	look does not meet the applicable statutory filing requirements, this spartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder at	xion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment ifficient for approval.	1t(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	meni
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	В	
	(voting group)	
11	0-27-21	
Dated		
(By a d	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other ec and fiduciary by that fiduciary)	
	Lisa B. Malamud	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

ľ