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COVER LETTER

TO: Amendment Section **Division of Corporations**

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NAME OF CORPORATI	KlaymanT ON:	oskes PA	
DOCUMENT NUMBER:	P97000039	2533	
The enclosed Articles of Ar	<i>mendment</i> and fee are su	bmitted for filing.	
Please return all correspond	lence concerning this ma	tter to the following:	
	Deborah L. Se	chwartz, Esq.	
		Name of Contact	Person
	KlaymanToskes	PA tka Klayman & Toske	s, P.A.
		Firm/ Company	
	1200 N. Feder	al Hwy, Suite 200	
		Address	
	Boca Raton, I	FL 33432	
		City/ State and Zip Cod	e
	lklayman@kl	aymantoskes.com	
	E-mail address: (to be u	sed for future annual report	notification)
For further information con	cerning this matter, pleas	se call:	
Deborah L. Sch	wartz	561 at (99 7- 9956
Name of Co	ntact Person		de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

	Articles of Ame to Articles of Incor of		2021 SEP SECRETA
Klayı	nan & Toskes, P.A.		20 SSEI
	<u>f Corporation as currently 1</u> 0039533	filed with the Florida Dept. of State)	AH 8: UF STA
	(Document Number of C	Corporation (if known)	10 15
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i> a	orida Profit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new na KlaymanTosk			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C. "chartered," "professional association," B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u> C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST C</u>	orp,""Inc," or "Co". A p or the abbreviation "P.A." <u>f applicable:</u> <u>[REET ADDRESS</u>]		
D. <u>If amending the registered agent an</u> <u>new registered agent and/or the new</u>		s in Florida, enter the name of the	
Name of New Registered Agent	same registered agent (Lawre	nce L. Klayman, Esq.)- only address cl	nange
	3200 N. Ocean Blvd. A (Florida street		
New Designment (NG) and Library	Fort Lauderdale	-	33308
<u>New Registered Office Address</u> :	(C	ity)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.*

Signature of New Registered Agent, if changing

Check if applicable

□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

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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 \underline{PT} John Doe X Remove Y Mike Jones <u>X</u> Add SVSally Smith Type of Action <u>Title</u> Address <u>Name</u> (Check One) 1) ____ Change ____ Add ___ Remove 2) ____ Change _____ Add ____ Remove 3) Change __ Add ___ Remove 4) ____ Change ___ Add Remove 5) ____ Change _____ Add _____ Remove 6) ____ Change Add _ Remove

Attach additional	l sheets, if necessary),	(Be specific)				
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<u>fan amendmen</u>	<u>t provides for an exc</u>	hange, reclassifie	cation, or cancell	ation of issued sha	ires,	
provisions for i	mplementing the amo	endment if not co	ontained in the a	mendment itself:		
(if not applied	cable, indicate N/A)					
				·		

'**.** .

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The date of each amendment(s) adoption:	 	
date this document was signed.		

_. if other than the

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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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- IN The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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 	SECRE	2021 SEP	
by	TARY OF ST ASSEE, FLC	20 AM	FILED
Dated 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	JRIDA	8:15	
appointed liduciary by that tiduciary) <u> <u> <u> <u> </u> </u></u></u>			
(Title of person signing)			