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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION	SALOMON HAZDAY, JR., P.A.
DOCUMENT NUMBER: _	~ ·
The enclosed Articles of Amer	ndment and fee are submitted for filing.
Please return all corresponden-	ce concerning this matter to the following:
	SALOMON HAZDAY, JR. Name of Contact Person
	Firm/ Company
	34 BERRY STREET, APT 5 H
	BROOKLY, NY 11249 City/ State and Zip Code
E-r	sal @ harday law. com/
For further information concer	ning this matter, please call:
SALOMON HAS	ct Person at (305) 632 - 9928 Area Code & Daytime Telephone Number
Name of Conta	ct Person Area Code & Daytime Telephone Number
	owing amount made payable to the Florida Department of State:
☑ \$35 Filing Fee ☐\$	43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) General Copy (Additional Copy is enclosed)

Street Address

Amendment Section

Division of Corporations

Clifton Building

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Articles of Amendment Articles of Incorporation of

SALOMON HAZDAY, JR.,	P. A.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P98000024	1474
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s):
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation or A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	34 Berry Street Apt. 5H
C. Enter new mailing address, if applicable:	Brooklyn, NY 11249 34 Berry Street
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Apt. 54
	Brooklyn, NY 11249
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent Chv	istian Aitken
H225 (Florida stree	Braganza Ave.
New Registered Office Address: Min	City) . Florida 33133 (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.

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.

Mike Jones, V as Remo			V as an Add.	e shalle be holed us some boe, i i us t
Example: \underline{X} Change	<u>PT</u>	John Doc	;	
X Remove	<u>V</u>	Mike Jon	<u>es</u>	
<u>X</u> Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>	Ì	<u>Name</u>	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3 + Change				
Add				
Remove				
4) Change				
Add				
Remove				
51 Change				
Add				
Remove				 -
Kenave				
6) Change		 -		
Add				
Remove				

rviach aaannonai sneets, 15 n	litional Articles, e necessary). (Be s	specific)			
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f an amendment provides (for an exchange,	reclassification	, or cancellation	n of issued shares,	
provisions for implementing	ng the amendmen	t if not contair	ed in the amen	dment itself:	
(if not applicable, indic	ate N/A)				
N/A					
					
				_	· <u></u>
					
					
			-		

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. .

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
Effective date <u>if applicable</u> : (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 a document's effective date on the Department of State's records.	not be listed as th
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 August 12, 2019	
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)	-
(Typed or printed name of person signing)	
<u>president</u>	
(Title of person signing)	