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W. Church



COVER LETTER

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TO: Amendment Section Division of Corporations

₹, . . .

NAME OF CORPORATION: LEWIS	TAX ADVISORY GROUP INC
DOCUMENT NUMBER: P98000035	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning thi	is matter to the following:
CARL B LEWI	S
	Name of Contact Person
LEWIS TAX A	DVISORY GROUP INC
	Firm/ Company
402 S KENTU	CKY AVE STE 220
	Address
LAKELAND FI	L 33801
	City/ State and Zip Code
AHARRISON @L	EWISTAX.US
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
AUBREY HARRISON	at (863) 687-3012
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
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

Articles of Amendment to Articles of Incorporation

EWIS TAX ADVISORY GROUP INC		9
(Name of Corporation as currently filed with th	e Florida Dept. of State)	- 3
P98000035939		
(Document Number of Corporation	n (if known)	_
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporation adopts the follow	ving amendmen
. If amending name, enter the new name of the corporation:		
EWIS TAX AND FINANCIAL GROUP	INC	The new
ame must be distinguishable and contain the word "corpora Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o ord "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name mus	abbreviation
Enter new principal office address, if applicable:	402 S KENTUCKY AVE	
Principal office address MUST BE A STREET ADDRESS)	STE 220	_
	LAKELAND FL 33801	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	402 S KENTUCKY AVE	
	STE 220	
	LAKELAND FL 33801	
. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr Name of New Registered Agent N/A		_
(Florida	street address)	
	, Florida	
New Registered Office Address:	ity) , Florida (Zip Code)	

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:	, una sai	iy omiin, or us un Auu.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
Kemove			
6) Change			
Add			
Remove			<u></u>

If amending or adding additional Artic	cles, enter change(s) here:
Attach additional sheets, if necessary).	(Be specific)
/A	
•	
<u>if an amendment provides for an exch</u>	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
/A	
	1.0.0

The date of each amendment(s) adoption: 06/01/2013
Effective date if applicable:	07/01/2013
Enterior date <u>in apprendic.</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	approved by the shareholders through voting groups. The following statement 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 action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
_{Dated} 06/1	7/2013
Signature/	all areas
Signature /	a director, president or other officer – if directors or officers have not been
sel	ected, by an incorporator - if in the hands of a receiver, trustee, or other court
арј	pointed fiduciary by that fiduciary)
	CARL B LEWIS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)