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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Lopez Levi Lower	nstein, P.A.	
DOCUMENT NUMI	P98000053264		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Lourdes Mansour		
		Name of Contact Persor	1
	Lopez Levi Lowenstein, P.A		
		Firm/ Company	
	201 Alhambra Circle, Suite 7	• •	
	·····	Address	
	Coral Gables, FL 33134		
		City/ State and Zip Cod	e
corpo	rations@lllgpa.com		
<u> </u>		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Lourdes Mansour		at (774-2945
Name of Contact Person		at (305) 774-2945 Area Code & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Lopez Levi Lowenstein Glinsky, 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 Agent
(Florida street address)
New Registered Office Address:, Florida
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.

Example: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Eric Glinsky	201 Alhambra Circle
X Add			Suite 701
Remove			Coral Gables, FL 33134
2) Change			
Add			
Remove			
3) Change		·	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Damaya			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an excl	nange, reclassifica	tion, or cancellatio	n of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	indment if not con	tained in the amen	dment itself:	
		<u> </u>		-
		 		
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	January 1, 2017	
The date of each amendment(s) a date this document was signed.	loption:	, if other than th
Effective date if applicable:		
	(no more than 90 days afte	er amendment file date)
Note: If the date inserted in this ledocument's effective date on the De		story filing requirements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number officient for approval.	of votes cast for the amendment(s)
	proved by the shareholders through voting each voting group entitled to vote separ	
"The number of votes cast	for the amendment(s) was/were sufficien	nt for approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareh	nolder action and shareholder
January Dated	4, 2017	
Signature		
(By a c selecte	irector, president or other officer – if dired, by an incorporator – if in the hands of ted fiduciary by that fiduciary)	
	Raimundo Lopez-Lima Levi	
	(Typed or printed name of pe	erson signing)
	President	
	(Title of person s	signing)

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