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COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: Lea Liberman, CPA, PA					
DOCUMENT NUMBER: P98000076362					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Lea Liberman					
	Name of Contact Person	1			
Liberman & Assoc	ciates, PA				
	Firm/ Company				
2699 Stirling Road, Suite A-305					
	Address				
Fort Lauderdale, f	FL 33312				
	City/ State and Zip Code	2			
lea@libermancpa.cor	m				
	ed for future annual report	notification)			
E-man address. (to be use	ed for fature annual report	notification)			
For further information concerning this matter, please	e call:				
Lea Liberman	954	967-6500			
Name of Contact Person	at (Area Co	967-6500 de & Daytime Telephone Number			
Name of Contact I cison	Alca Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\times \text{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	Street Address				
Amendment Section	Amendment Section				
Division of Corporations P.O. Box 6327	Division of Corporations				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Lea Liberman, CPA, PA. (Name of Corporation as currently filed with the Florida Dept. of State) P98000076362 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Liberman & Associates, PA 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent

N/A

(Florida street address)

N/A

Non-Registered Office Address

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

New Registered Office Address: N/A , Florida (City) , Florida (Zip Code)

Signature of New Registered Agent, if changing

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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name	1	<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					
6) Change	 ,			_	, , , , , , , , , , , , , , , , , , ,
Add				_	
Remove					

	cles, enter change(s) here: (Be specific)
N/A	
7.75	<u> </u>
. If an amendment provides for an exch	lange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption: 2/10/2014	_, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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 2/10/2014	
Dated 2 10/2011	
Si di Aliana	
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)	
Lea Liberman	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_