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(A	ddress)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: WAYNE A. GRO	SNICK AND ASSOCIATE	ES, P.A.
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all correspo	ondence concerning this ma	atter to the following:	
W	/AYNE A. GROSNICK		
_		Name of Contact Person	n
"	AYNE A. GROSNICK A	ND ASSOCIATES, P.A	
		Firm/ Company	
1	3191 STARKEY ROAD, S	• •	
	JIJI BIMORET ROMB,	Address	
	. 0.00 0 0000 . 23772	Address	
l. —	ARGO, FLORIDA 33773		
		City/ State and Zip Cod	e
WAYN	E@SOLUTIONSCOUNSE	LING.ORG	
****	E-mail address: (to be u	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
DENISE HUGHES-CONLON Name of Contact Person		727 at (586-6942
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	ne 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)	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

Articles of Amendment to

Articles of Incorporation

of

WAYNE A. GROSNICK AND ASSOCIATES, P.A.

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P98000090619	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	tis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	NIA
(Principal office address MUST BE A STREET ADDRESS)	
	7179
C. Enter new mailing address, if applicable:	ALLA MARIE TO THE
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	
Name of New Registered Agent NA	,
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	ent:
I hereby accept the appointment as registered agent. I am familio	ir with and accept the obligations of the position.
Signature of Nev	w 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: 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>	Address
1) Change	S	SEAN KING	2614 COVE CAY #302
Add X Remove			CLEARWATER, FL 33760
2) Change	D	DENISE HUGHES-CONLON	14481 OLIVER STREET
X Add			LARGO, FLORIDA 33774
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
NA A	
	·
	_
F. if an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
NIA	
	
	

) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date w Department of State's records.	rill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e 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 of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(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.	adopted by the incorporators without shareholder action and shareholder	
APRIL Dated	1,2018 Vande Francisco	
Signatura	V SHELLY CHOUCK	
(By	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	WAYNE A. GROSNICK	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	