## P99000107618

(R	equestor's Name)	
(A	ddress)	
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PICK-UP	WAIT	MAIL
	usiness Entity Nar	ne)
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Amend W.C. C.COULLIETTE JAN 07 2011

**EXAMINER** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	RATION:	Jim McGlone, In	C.
DOCUMENT NUMI	BER:	P990001076	18
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corre	spondence concerning th	is matter to the following:	
		mes J. McGlone, Jr.	
	1	Name of Contact Person	
		lim McGlone, Inc.	
		Firm/ Company	
	2582	SW Hinchman Street	
		Address	
	····	t Lucie, FL 34984-4913	
		City/ State and Zip Code	
	JMcGlone@F E-mail address: (to be use	loridaRealtyCentral.com d for future annual report notificatio	on)
For further information	n concerning this matter,	please call:	
Jim	n McGlone	at ( <u>772</u> )	398-1212
Name of C	Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a check fo	r the following amount n	nade payable to the Florida De	partment of State:
☑\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclose	S52.50 Filing Fee Certificate of Status  d) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 29, 2010

JAMES J. MCGLONE, JR JIM MCGLONE, INC. 2582 SW HINCHMAN ST PORT ST LUCIE, FL 34984-4913

SUBJECT: JIM MCGLONE, INC. Ref. Number: P99000107618

We have received your document for JIM MCGLONE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 710A00030001

SECHEDIAN OF STATE

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

Jim M	cGlone, Inc.		
	ntly filed with the Florida Dept.	of State)	
P990	000107618		
(Document Num	ber of Corporation (if known)		
Pursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	, Florida Statutes, this Florida I	Profit Corporation ad	lopts the following
A. If amending name, enter the new name of	the corporation:		
James 、	J McGlone, P.A.		The new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered." "prof	designation "Corp," "Inc," or "	Co". A professional	ted" or the corporation
B. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u>			_ <b></b>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	TE BOX)		FILED 11 JAN -7 AM II: 19 TALLAN SEEE, FLORID TALLAN SEEE, FLORID
			TATE LORIDA
D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered agent and/or registered agent and/or the new registered agent agen		la, enter the name of	<u>The</u>
	tered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
-		, Florida	
	(City)	(Zip Code)	
lew Registered Agent's Signature, if changin			
hereby accept the appointment as registered ag	ent. I am familiar with and acce	pt the obligations of t	he position.

Signature of New Registered Agent. if changing

			tors, enter the title and name of each officer/d	irector being
			of each Officer anti/or Director being added:	
(Attac	h additie	onal sheets, if necessary)		
<u>Title</u>	•	Name	Address	Type of Action
	_			_ 🗖 Add
	-			_ Remove
			<del></del>	_
	<del></del>			_ 🗖 Add
				_ Remove
				_
·	—			_
				Remove
E. If a	mendin	ng or adding additional A	rticles, enter change(s) here:	
	ach addi	itional sheets, if necessary)	). (Be specific)	
	1.			
	$\mathcal{N}_{o}$	chance to	business purpose, shall	remain Professional
	n	1511		
	K PG	1 Estate Se	r.vices	
<del> </del>				<del> </del>
E 16		d		
			exchange, reclassification, or cancellation of issuendment if not contained in the amendment	
12.2		applicable, indicate N/A)		
				<del></del>
			<u></u>	
				<del> </del>
•				

The date of each amendmen	t(s) adoption: December 21, 2010
Effective date if applicable:	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	a director, president or other officer – if directors or officers have not been
sele	ointed fiduciary by that fiduciary)
	James J McGlone, Jr.
	(Typed or printed name of person signing)
	President
	(Title of person signing)