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2022 JAN 20 AM 9: 42
SECRETARY OF STA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Koulianos & Assoc	ciates, PA			
DOCUMENT NUM	BER:				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	John Koulianos				
	Name of Contact Person				
		Firm/ Company			
	41 N. Ring Avenue				
		Address	<u> </u>		
	Tarpon Springs, FL 34689				
		City/ State and Zip Cod	e		
	johnkoulianos@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatic	on concerning this matter, pleas	se call:			
John Koulianos		at (727	422-5022		
Name of Contact Person		at (727) 422-5022 Area Code & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:		
S35 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Koulianos and Associates, PA (Name of Corporation as currently filed with the Florida Dept. of State)-S01692 (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: Koulianos CPA, 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." 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: (City) 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. Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	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>Address</u>	
l) Change		_	 	
Add				
Remove				
2) Change				
Add				
Remove 3) Change			 	
Add				
Remove				
4) Change			 	
Add				
Remove				
5) Change		_	 	
Add				
Remove				
6) Change		_	 	
Add				
Remove				

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provisi	ions for impi	rovides for an lementing the	<u>amendme</u>	<u>, reclassificent if not co</u>	ation, or car intained in t	ncellation of the amendm	<u>issued shar</u> ent itself:	<u>es,</u>	
(if	not applicah	ole, indicate N	[/] A)						
									
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareho action was not required.	lder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
Dated	
Signature (By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or ot appointed fiduciary by that fiduciary)	ot been her court
John M. Koulianos	
(Typed or printed name of person signing)	
President	
(Title of person signing)	