	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	
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	(Business Entity Name)	
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Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer:	
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Office Use Only



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MAY - 4 2016

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2016 MAY

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 122504 6383A

AUTHORIZATION

COST LIMIT

ORDER DATE: April 29, 2016

ORDER TIME : 3:42 PM

ORDER NO. : 122504-005

CUSTOMER NO:

6383A

DOMESTIC AMENDMENT FILING

NAME: PATRONE & KEMP, P.A.

EFFECTIVE DATE:

__ ARTICLES OF AMENDMENT

____ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section
Division of Corporations

· ·						
NAME OF CORPO	DRATION: PATE	ONE & KEMI	Ρ.Α.			
DOCUMENT NUM	DOCUMENT NUMBER: 5.54.722.					
The enclosed Article	s of Amendment and fee are si	ıbmiticd for filing.				
Please return all corr	espondence concerning this ma	itter to the following:				
	Q:01 N.C. &	1 00705-10				
	MADEL	J. PATRONE Name of Contact Person	in and the second			
	On -					
	PATRONE + KEMP P.A.					
		Firm/ Company				
	12685 NE	L BRITTANY B	LVD -			
	. ,	Address	-			
	FART MY	600 E. 3390	7			
		ERO FL 3390 City/ State and Zip Coo	le .			
			•			
	debbie @ a	Datvone law. Co sed for future annual report	m			
	E-mail address: (to be d	sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:				
ANDRE	PATRONE	11(239) 278-1800 nde & Daytime Telephone Number			
Name	of Contact Person	Ares Co	ide & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:			
Danie mili	Maranana in i					
to 335 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy	☐\$52.50 Filing Fee Certificate of Status			
	Continuente of Blacks	(Additional copy is	Certified Copy			
		enclosed)	(Additional Copy			
			is enclosed)			
M	illiág Address	Street	Address			

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 2, 2016

CSC Atten: Courtney Williams 1201 Hays Street Tallahassee, FL 32301

SUBJECT: PATRONE & KEMP, P.A.

Ref. Number: S54722

Please give original submission date as file date.

We have received your document for PATRONE & KEMP, P.A. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

Please check only ONE box under adoption of amendment on page 4 of the amendment form.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 316A00009036

DEPARTMENT OF STATE

Articles of Amendment to Articles of Incorporation of

PATRONE & KEM	<u>Р.Д.</u>		
(Name of Corporation as currently	v filed with the Florida Dept. of State)		
5547aa			
	Corporation (if known)	- /	
• • • • • • • • • • • • • • • • • • • •	, , .		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fol	llowing amendr	nent(s) to
A. If amending name, enter the new name of the corporation;			
A CONTROL OF THE CONT			
name must be distinguishable and contain the word "corporation	2 Teamston: " As Theomstands of	The ne	
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "word "chartered," "professional association," or the abbreviation."	Co". A professional corporation name	must contain h	he he
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			•
			-
			•
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	 <?	3	
(wanting winters (NAT BE A FOST OFFICE BOA)			
			h Ţ Americana
		دن ۱	7
		·	
D. If amending the registered agent and/or registered office addr		3	
new registered agent and/or the new registered office address:	<u>:</u>	9:24	
Name of New Registered Agent:	,		
(finida stre	et addréss)		
No. Debtech 100 of the m	794-14 4		
New Registered Office Address:	, Florida (Cliy)	(Zip Code)	•,
·	12.00	1-4-20-0	
New Rogistered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am famillar w	ith and accept the obligations of the posi	tion.	
	•		
	and the second s		
Signature of New Ri	egistered 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 officeridirector 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 afficer/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 Remov Example:	re, and Sal	lly Smith, SV as an Add.	
X Change	PT	John Doc	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>'Title</u>	<u>Name</u>	Address
I) X Change	PT	AMPLE J. PATRONE	12486 NEW BRITTANY BLUD
			FUET MYERS FL 33907
Remove			<u></u>
2) X Change	VP 5	KENNETH E KEMPIT	12636 NEW BRITTING BLYP
^dd			FORT MYERS FL 33907.
Remove			
3) Change			
Add			Application of the second of t
Remove			
4)Change			
			e de la companya del companya de la companya del companya de la co
Remove.	•		-
5) Change		-	
Add		·	***************************************
Remove			
6) Change			***************************************
Add			****
Damova			

(Attach additional sheets, if necessary). (Be specific)	76.14.
	· · · · · · · · · · · · · · · · · · ·
	· _ · _ · _ · · _ · _ · _ · · _ ·
f. If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contain (if not applicable, indicate N/A)	, or cancellation of issued shares, ed in the amendment itself:
<u> </u>	
	

The date of each amendment(s) adoption:		4/15	14	if other than the
Effective date if applicable:				
Eliccite date il appueame:	(no more the	ın 90 days	after amendmen	I file date)
Note: If the date inserted in this block does document's effective date on the Department of			atutory filing re	quirements, this date will not be listed as the
Adoption of Amendment(s) (CI	IECK ONE)			
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		The number	er of votes cast f	or the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes cast for the ame	ndment(s) was/	were suffic	cut for approva	1
by	oting group)			
(ve	ilng group)			
D The amendment(s) was/were adopted by the action was not required.	board of direct	lors withou	sharcholder se	tion and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators	without sha	reholder action :	and shareholder
Dated + 29	16			
Signature	7			
(By a director, pre	sident or other or orporator – if i	officer — if n the hands	directors or offic	crs have not been ustee, or other court
	ANDRE			
5	(Typed or print	ted name o	person signing	· · · · · · · · · · · · · · · · · · ·
			TREASURE	<u></u>
····	(Ti	tle of perso	n signing)	.