## F28462

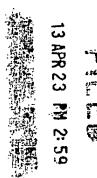
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Thomas M. Dryden, Esq.  Name of Contact Person  Thomas M. Dryden, P.L.  Firm/ Company  1705 Colonial Blvd., Ste. B-3  Address  Fort Myers, FL 33907  City/ State and Zip Code  JHolmes@eye.md  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Thomas Dryden  Name of Contact Person  Area Code & Daytime Telephone Number  Enclosed is a check for the following amount made payable to the Florida Department of State:  \$35 Filing Fee  Certificate of Status  Certificat Copy  (Additional copy is enclosed)	NAME OF CORPOR	ATION: Retina Cons	sultants of South	west Florida, P.A.	
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77 M	■ \$35 Filing Fee		Certified Copy (Additional copy is	Certificate of Status Certified Copy (Additional Copy	
Mailing Address Street Address					
Amendment Section Amendment Section Division of Corporations Division of Corporations			Amendment Section		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

## Retina Consultants of Southwest Florida, P.A.

Articles of Incorpor	ration
Retina Consultants of Southwest Florida, P.	A.  a Deut. of State)  wn)  de Profit Corporation adopts the following amendment(s) to
(Name of Cornoration as currently filed with the Florid	a Dept. of State)
F28462	
(Document Number of Corporation (if known	wn)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	da Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," " "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the
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 is new registered agent and/or the new registered office address:  Name of New Registered Agent	a Florida, enter the name of the
(Florida street ad	dress)
Now Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a	nd accept the obligations of the position.

Signature of New 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.

X Change	PT John	n Doc	
X Remove	Y Mik	se Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	Title	Name	Addregs
1) Change	VST	Glenn L. Wing	6901 International Center Blvd.
Add			Fort Myers, FL 33912
X Remove			
2) X Change	ST	Avtar T. Ghuman	6901 International Center Blvd.
Add			Fort Myers, FL 33912
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Persona			

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	the amendment if no	t contained in the	amendment itself:	<del></del>
<u>ovisions for implementing t</u>	37/4S			
ovisions for implementing ( (If not applicable, indicate	: N/A)			
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The date of each amendment(s) ad	4/8/2013
THE SUM OF PACE SPRENGERS (1) IN	
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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 ado action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder
Onted	4/8/2013
Signature	Janah . Walker min.
	irector, president or other officer - if directors or officers have not been
	d, by an incorporator - if in the hands of a receiver, trustee, or other court
appoint	ted fiduciary by that fiduciary)
	Joseph P. Walker, M.D.
	(Typed or printed name of person signing)
	President
	(Title of person signing)