## P000000011864

| (Red   | questor's Name)                             | -                 |
|--|---|-------------------|
| (Add   | iress)                                      |                   |
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| (City  | //State/Zip/Phone                           | e #)              |
| PICK-UP  | ☐ WAIT                                      | MAIL              |
| (Bus   | siness Entity Nan                           | ne)               |
| (Doc   | cument Number)                              |                   |
| Certified Copies   | Certificates                                | s of Status       |
| Special Instructions to F<br>AND YCW &<br>ADVISCO<br>ADDTI | Filing Officer:<br>Salzn<br>I to x<br>un da | nan<br>Add<br>He: |

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Amend/Mame (104/23/13 Ch 8

## **COVER LETTER**

TO: Amendment Section

| Division of Cor        | porations                                   |  |  |
|------------------------|---|--|--|
| NAME OF CORPO          | <sub>RATION:</sub> Unice Salz               | man, P.A.  |  |
| DOCUMENT NUM           | P0000007786                                 | i4   |  |
|                        | s of Amendment and fee are su               |  |  |
| Please return all corr | espondence concerning this ma               | tter to the following:   |  |
|                        | Andrew J. Salzm                             | an   |  |
|                        |   | Name of Contact Persor   | <u> </u>   |
|                        | Unice Salzman R                             | Radel, P.A.  |  |
|                        |   | Firm/ Company  |  |
|                        | 2570 Coral Landi                            | ings Boulevard,  | Suite 201  |
|                        | -   | Address  |  |
|                        | Palm Harbor, FL                             | 34684  |  |
|                        | · · · · ·                                   | City/ State and Zip Code   | 2  |
| 90                     | alzman@unicocal:                            | zman com   |  |
| <u>as</u>              | alzman@unicesal                             | sed for future annual report                                       | notification)  |
|                        | E-man address. (to be us                    | sed for future annual report                                       | nottication)   |
| For further informati  | on concerning this matter, pleas            | se call:   |  |
| Andrew J. S            | alzman                                      | <sub>at (</sub> 727  | , 723-3772   |
| Name                   | of Contact Person                           | Area Co  |  |
| Enclosed is a check t  | for the 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) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| M                      | ailing Address                              | Street   | Address  |
| An                     | nendment Section                            | Amendment Section  |  |
|                        | vision of Corporations                      | Division of Corporations   |  |
|                        | D. Box 6327<br>Ilahassee, FL 32314          |  | Building<br>executive Center Circle  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



| Unice Salzman, P.A.   | ······································                         |
|---|--|
| (Name of Corporation as currently filed with the  | Florida Dept. of State)  |
| P0000077864   |  |
| (Document Number of Corporation (   | (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:   | s Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation:   |  |
| Unice Salzman Radel, P.A.   | The new  |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the         |
|   | N/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)   | N/A  |
| (Mading dudress MAT BE A FOST OFFICE BOX)   |  |
|   |  |
|   |  |
| D. If amending the registered agent and/or registered office add  | dress in Florida, enter the name of the                        |
| new registered agent and/or the new registered office address   | <u>ss:</u>   |
| Name of New Registered Agent  |  |
|   |  |
| (Florida s  | treet address)   |
| New Registered Office Address:  | , Florida (Zip Code)   |
| (City   | (Zip Code)   |
|   |  |
| New Registered Agent's Signature, if changing Registered Agen   |  |
| 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   |

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                   | <u>PT</u> <u>John</u> | <u>n Doe</u>    |                     |
|----------------------------|-----------------------|-----------------|---------------------|
| X Remove                   | <u>V</u> <u>Mik</u>   | e Jones         |                     |
| X Add                      | SV Sall               | y Smith         |                     |
| Type of Action (Check One) | <u>Title</u>          | <u>Name</u>     | <u>Addres</u> s     |
| 1) Change                  | Secretary             | F. Robert Radel | 5060 Pinnacle Drive |
| X Add                      |                       |                 | Oldsmar, FL 34677   |
| Remove                     |                       |                 | -                   |
| 2) Change                  |                       |                 |                     |
| Add                        |                       |                 |                     |
| Remove                     |                       |                 |                     |
| 3) Change                  |                       |                 |                     |
| Add                        |                       |                 |                     |
| Remove                     |                       |                 |                     |
| 4) Change                  |                       |                 |                     |
| Add                        |                       |                 |                     |
| Remove                     |                       |                 |                     |
| 5) Change                  |                       |                 |                     |
| Add                        |                       |                 |                     |
| Remove                     |                       |                 |                     |
| 6) Change                  |                       |                 |                     |
| Add                        |                       |                 |                     |
| Remove                     |                       |                 |                     |

| C. If amending or adding additional Arti<br>(Attach additional sheets, if necessary).                            |  |
|--|--|
| V/A  | (Be specific)  |
| <u> </u>   |  |
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| If an amendment provides for an exch<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| I/A  |  |
|  |  |
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| The date of each amendment(s) adoption: 04/12/5013   |
|--|
| Effective date <u>if applicable</u> :  |
| (no more than 90 days after amendment file date)   |
|  |
| Adoption of Amendment(s) (CHECK ONE)   |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.  |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |
| Dated 04/15/2013   |
| Dated O II 1012010   |
| Signature / Way  |
| (By a director, president of other officer – if directors or officers have not been  |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court  |
| appointed fiduciary by that fiduciary)   |
| Andrew J. Salzman  |
| (Typed or printed name of person signing)  |
| Vice -President  |
| (Title of person signing)  |