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COVER LETTER

Division of Corporations y, mo Bard Navid H. Gilbert, mo. PA NAME OF CORPORATION: Mrchae The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

Articles of Amendment to Articles of Incorporation of

MICHAEL T. REILLY, MD AND DAVID H. GILBERT, MD, P.A.

(Name of Corporation as currently	y filed with the Florida Dept. of State)
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	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 "	n," "company," or (incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	// 1 ~2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED WILLIAM 28
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	X / / X /
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. I am familiar v	
Signature of New R	egistered Agent, if changing

Executive Officer; CFC held. President, Treasu Changes should be not a change, Mike Jones i Mike Jones, V as Remo	O = Chief in orer, Direct ored in the fo deaves the c	Financial Officer. If an officer/direc or would be PTD. llowing manner. Currently John Doc	Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief for holds more than one title, list the first letter of each office is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	4	Michael T. K	Reilly, mo
Add			5301 N. Dixie Huy
A Remove			Svite # 203 OAK LAND PARK, FLA 3333
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

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:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

ach additional sheet	additional Articles, e s, if necessary). (Be	specific)			
					
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n amendment prov	ides for an exchange,	reclassification.	or cancellation o	of issued shares.	
ovisions for implen	<u>renting</u> the amendme	nt if not contain	ed in the amendn	ent itself:	
(if not applicable,	indicate N/A)	A			
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The date of each amendment(s) adoption:	he
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, this date will not be listed as document's effective date on the Department of State's records.	he
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	
by	1
☐ 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_Nov. 1, 2015	<u> </u>
Signature Michael T. Reill, m	
(By a director, president or 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)	
Michael Reilly MO (Typed or printed name of person signing)	
(Title of person signing)	