P03000 53718

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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPOR	RATION: ALTMAN INC.						
DOCUMENT NUMI	D02000052719						
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all corre	spondence concerning this mat	tter to the following:					
	CURTIS ALTMAN						
	Name of Contact Person						
	Firm/ Company						
	1055 NW 110TH LANE						
	Address						
	CORAL SPRINGS, FL 33071						
	City/ State and Zip Code						
	CURTISTX68@GMAIL.COM						
	E-mail address: (to be us	ed for future annual report	notification)				
For further informatio	n concerning this matter, pleas	e call:					
CURTIS ALTMAN		954 at (658-7591				
Name of Contact Person			de & Daytime Telephone Number				
Enclosed is a check for	r the following amount made p	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)				
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

ALTMAN INC. (Name of Corporation as currently filed with the Florida Dept. of State) P03000053718 (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: ADVANCED ORTHOPEDIC DEVICES INC. 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)

Example:

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	1,1	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· ····
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) here:
	(Be specific)
	
. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
	idment if not contained in the amendment itself:
provisions for implementing the amer	
provisions for implementing the amer (if not applicable, indicate N/A)	
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provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amer (if not applicable, indicate N/A)	

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 document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action and	d shareholder
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
JULY 1:	5, 2023	
Dated		
Signature /		
(By-	a director, president or other officer - if directors or officers have not been	
	eted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	ointed fiduciary by that fiduciary)	
	CURTIS ALTMAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u></u>

the