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SECRETARISE PROMISE
TALLAHAS FROM PROMISE

C. Coulliene AUG 0 4 2005

Primary Care Practitioners 102 NE 2ND Avenue Hallandale, Florida 33009 Telephone: (954) 894-0522 – (954) 964-1244

July 18, 2005

Division of Corporation Amendment Section Division of Corporation 409 E. Gaines Street Tallahassee, Florida 32399

RE: Corporation Name Change

To Whom It May Concern:

Attached please find our Transmittal Letter to change the corporate name <u>from</u>

<u>Amerimez II to Amerimedz II.</u> A copy of the Articles of Incorporation is attached for your review. If you have any questions, please call our office at (954) 894-0522.

Kind regards,

Jorge Garcia



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 21, 2005

SORAE GARCIA PRIMARY CARE PRACTIONERS 102 NE 2ND AVE. HALLENDALE, FL 33009

SUBJECT: AMERIMEZ II INCORPORATED

Ref. Number: P04000158028

We have received your document for AMERIMEZ II INCORPORATED and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

Please return your document, along with a copy of this letter, within 60 days or, your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette **Document Specialist**

Letter Number: 605A00047884

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	
DOCUMENT NUMBER: P04000 158028	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	; ;
Jorge Garcia	
(Name of Contact Person)	
Primary Care Practitioners (Firm/Company)	
(Firm/ Company)	
102 NE 2no Avenue	
Hallandak, Florida 32 (City/State/and Zip Code)	5009
For further information concerning this matter, please call:	
Soroe Garcia at (954)	894-0522 Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee Sectificate of Status Status Status 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 Tallahassee	T Section Corporations les Street

Tallahassee, FL 32399

Articles of Amendment
Articles of Incorporation
Name of corporation as currently filed with the Florida Dept. of State)
(Name of corporation as currently fred with the Florida Dept. of State)
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Amerimedz II Inc.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
N/A- Name change only

(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
JM
•

(continued)

The date of each amendment(s) adoption: 77405
Effective date if <u>applicable</u> : (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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)
☐ 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.
Signed this 25 TH day of July . 2005
Signature (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
Torge Garaa (Typed or printed name of person signing)
Director of Operations (Title of person signing)

FILING FEE: \$35