P05000015400

| (Re | equestor's Name) | |
|-------------------------|-----------------------|---------------------------------------|
| | | |
| (Ac | ldress) | |
| | | |
| (Address) | | |
| • | • | |
| /Cit | ty/State/Zip/Phone | - 1 0 |
| (Oil | ly/Otate/Zip/i florit | - π) |
| PICK-UP | WAIT | MAIL |
| | | |
| (Bu | siness Entity Nar | ne) |
| | | |
| (Do | cument Number) | |
| • | ŕ | |
| Certified Copies | Certificates | of Status |
| Cerunea Copies | _ Certificates | o o o o o o o o o o o o o o o o o o o |
| | | |
| Special Instructions to | Filing Officer: | j |
| | | į |
| | | |
| | | 1 |
| | | |
| | | |
| | | |
| | | |
| · | | |





900223761409

03/05/12--01031--011 **35.00

12 HAR -5 AM 8: 48

SECRETAL DE COLORGIA DE SUNS SECRETALA DE SUNS S

Amendalane (19 3. n. 12

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: EVELYN DOCUMENT NUMBER: P050000154 | | Α |
|--|---------------------------------------|---|
| DOCUMENT NUMBER: 1 000000104 | | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | |
| Please return all correspondence concerning this i | natter to the following: | |
| EVELYN RAQU | JEL BITCHATCHI | |
| EVELYN BITCH | Name of Contact Perso | n |
| 20191 EAST C | Firm/ Company OUNTRY CLUB Address | DRIVE. APT#2601 |
| AVENTURA , F | L 33180 | |
| | City/ State and Zip Cod | e |
| raquelin64@hotma | | |
| E-mail address: (to be | used for future annual report | notification) |
| For further information concerning this matter, plo | ease call: | |
| EVELYN RAQUEL BITCHAT Name of Contact Person | CHI _{at 786} | , 285-4647 |
| Name of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for the following amount mad | le payable to the Florida Depa | artment of State; |
| ■ \$35 Filing Fee | | ☐ \$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 | Ameno Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

| EVELYN BITCHATCHI, P.A. | | |
|---|--|--|
| (Name of Corporation as currently filed with the Fie | orida Dept, of State) | |
| P05000015406 | | |
| (Document Number of Corporation (if | known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation: | Torida Profit Corporation adopts the following | ; amendment(s) to |
| A. If amending name, enter the new name of the corporation: EVELYN RAQUEL BITCHATCHI, P.A. | | The new |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "C word "chartered," "professional association," or the abbreviation "I | Co". A professional corporation name must c | |
| B. Enter new principal office address, if applicable: | EVELYN RAQUEL BITCHATCHI | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 20191 EAST COUNTRY CLUB DRIVE. APT#2601 | |
| | AVENTURA, FL 33180 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NA | |
| D. If amending the registered agent and/or registered office address: | ess in Florida, enter the name of the | 12 HAR -5 |
| Name of New Registered Agent /\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | <u> </u> | المراجعة الم |
| (Florida stree | , | M 8: 15 |
| New Registered Office Address: /\ \[\bar{\chi}\] | , Florida(Zip Code) | (3) . <u>1</u> (1 |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w | | |
| Signature of New Revistaged 4s | gent 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 hold. 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.

| Example: \underline{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) | Title | <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 | | | |

| If amending or adding additional Artic attach additional sheets, if necessary). | (Be specific) |
|--|--|
| | |
| | |
| | *************************************** |
| | |
| | |
| | 1 |
| | |
| A COLOR OF THE PROPERTY OF THE | |
| | - |
| | |
| | |
| | |
| | |
| | |
| | 77-811-91-91-91-91-91-91-91-91-91-91-91-91-9 |
| | |
| | |
| provisions for implementing the amen | ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
| | |
| | } |
| | |
| | -Mr |
| | |
| *** | |
| | |

| The date of each amendment(s) adoption: 02/29/2012 |
|--|
| Effective date if applicable: |
| (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 east 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. |
| Dated 02/29/2012 Signature Signature |
| Signature - Surger (Stolate) |
| (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) |
| EVELYN Raquel Bitchesteni (Typed or printed name of person signing) |
| (ТУреd or printed name of person signing) |
| D.P. |
| (Title of nerson signing) |