

P06000053034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

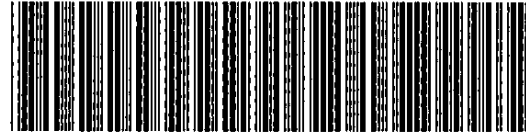
(Document Number)

Certified Copies _____ Certificates of Status

Special Instructions to Filing Officer:

Office Use Only

name OK



600077012736

07/06/06--01038--005 **43.75

NIC
SFL

FILED
06 JUL 25 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Dr. Porcaro's Hair Restoration and Cosmetic Surgery Center, P.A.

DOCUMENT NUMBER: P06000053034

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Porcaro

(Name of Contact Person)

Dr. Porcaro's Hair Restoration and Cosmetic Surgery Center, P.A.

(Firm/ Company)

1170 SW Dyer Point Rd.

(Address)

Palm City, FL 34990

(City/ State and Zip Code)

For further information concerning this matter, please call:

Elizabeth Carrillo

(Name of Contact Person)

at (772) 286-0509

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2008

**JOHN PORCARO
DR. PROCARO'S HAIR RESTORATION
1170 SW DYER POINT ROAD
PALM CITY, FL 33990**

**SUBJECT: DR. PORCARO'S HAIR RESTORATION AND COSMETIC
SURGERY CENTER, P.A.
Ref. Number: P06000053034**

We have received your document for DR. PORCARO'S HAIR RESTORATION AND COSMETIC SURGERY CENTER, P.A. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption of each amendment must be included in the document.

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) 245-6908.

Sylvia Gilbert
Document Specialist

Letter Number: 506A00045358

*Date
Included
7/20/08*

RECEIVED
00 08 AM 15 JUL 2008
DIVISION OF CORPORATIONS

The date of each amendment(s) adoption: July 1, 2006

Effective date if applicable: July 1, 2006
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

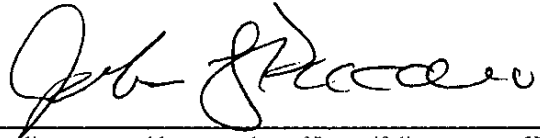
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

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.

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)

John Porcaro
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35