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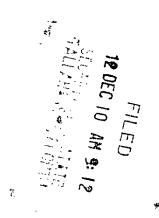
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPOR | ATION: Medical Ps | ychiatric | Consult | ants, Inc., |
|---------------------------|--|--|-------------------------------|--|
| DOCUMENT NUMB | _{ER:} P1100006697 | 7 | | |
| | f Amendment and fee are su | | ng. | |
| Please return all corresp | ondence concerning this ma | tter to the follo | wing: | |
| } | Eric Moore | | | |
| | <u> </u> | Name of C | ontact Person | |
| I | Medical Psychiat | ric Consi | ultants, l | nc. |
| - | | Firm/ (| Company | |
| ; | 801 International | Parkway | , Suite (| 500 |
| _ | | Ad | dress | |
| | Lake Mary, FL 32 | 2746 | | |
| _ | | City/ State | and Zip Code | |
| emo | ore1981@aol.co | m | | |
| | E-mail address: (to be us | | nnual report i | notification) |
| For further information | concerning this matter, please | se cail: | | |
| Marti Osborno | 9 | at | ₍ 407 | 421-4434 le & Daytime Telephone Number |
| Name o | f Contact Person | | Area Coo | le & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the | Florida Depa | rtment of State: |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Fi Certified (Addition enclosed) | Copy al copy is | ■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amer Divis P.O. | ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314 | | Amendo Division Clifton | Address ment Section n of Corporations Building xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

| Medical Psychiatric Consultants, Inc. | | | |
|--|--------------------------|---|----------------|
| (Name of Corporation as currently filed with the Flo | orida Dept. of State) | | ı |
| P11000066977 | | | |
| (Document Number of Corporation (if | known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation: | lorida Profit Corporati | on adopts the following | g amendment(s) |
| A. If amending name, enter the new name of the corporation: | | | |
| Moore Medical Group, Inc. | | | 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 "P | o". A professional coi | corporated" or the abroporation name must c | breviation |
| | NA | | , Of |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | | - 3. |
| | | | 0 X |
| | | | T D |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NA | 1 | \$: 12 |
| | <u></u> | | |
| | | | |
| D. If amending the registered agent and/or registered office addre | ss in Florida, enter the | name of the | |
| new registered agent and/or the new registered office address: Name of New Registered Agent NA | | | |
| The state of the s | | | |
| (Florida stree | t address) | | |
| New Registered Office Address: | , Flo | rida | |
| (City) | | (Zip Code) | |
| | | | |
| New Registered Agent's Signature, if changing Registered Agent: | _ | | |
| I hereby accept the appointment as registered agent. I am familiar wi | th and accept the obliga | ations of the position. | |
| Signature of New Registered Ag | ent if changing | | |
| 2.6 | | | |

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 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.

| Example: X Change | <u>PT</u> | John Do | <u>oe</u> | |
|----------------------------|--|----------|-------------|-----------------|
| X Remove | <u>v</u> | Mike Jo | <u>nes</u> | |
| X Add | <u>sv</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | | | NA | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | <u>. </u> | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| | ticles, enter change(s) here: . (Be specific) |
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| | hange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
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| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |

The date of each amendment(s) adoption: January 1, 2013 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 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 (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) Eric Moore (Typed or printed name of person signing) **CEO** (Title of person signing)