## P13000047314

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C. LEWIS

OCT 8 2013

EXAMINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations MILLER VASI, P.A. NAME OF CORPORATION: \_\_ DOCUMENT NUMBER: <u>P13 0000 47314</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company Avenue, Suite 201 For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **■**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation

MILLED WAST DA	FILED
(Name of Corporation as currently filed with the Florida Dept.	of State) 13 SEP 27 AM 10: 02
P130000 47314	SECRETARY OF STATE FALLAHASSEE FLORIDA
(Document Number of Corporation (if known)	FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Prov</i> its Articles of Incorporation:	fit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Maj Vasigh. P.A.	The new
name must be distinguishable and contain the word "corporation," "comparation," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A proword "chartered," "professional association," or the abbreviation "P.A."	ny," or "incorporated" or the abbreviation fessional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u>  A</u>
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1   K
D. If amending the registered agent and/or registered office address in Florid new registered agent and/or the new registered office address:	da, enter the name of the
Name of New Registered Agent N/A	·
(Florida street address)	
New Registered Office Address: N/ M	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	ant the obligations of the position
I hereby accept the appointment as registered agent. I am familiar with and acc	
Signature of New Registered Agent, if cha	naina

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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	N/A N/A	N/A
Add	<b>↓</b>	
Remove	•	
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		***
Remove		
6) Change		
Add		
Remove		

. <u>If a</u> (Att	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
	N/A
	•
. <u>If a</u> pr	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
	N/A

The date of each amendment(s) adoption:	Septim	her 17,2	013	, if other than the
date this document was signed.	1 ,		FI	LFN
Effective date if applicable:	(no more than 90 day	ys after amendment file	date) 13 SEP 2	7 AM 10: 02
			SECRETAR	Y OF STATE EE. FLORIDA
Adoption of Amendment(s)	CHECK ONE)		Zewin 28	EE. FLORIDA
The amendment(s) was/were adopted by the shareholders was/were sufficient f	the shareholders. The num or approval.	ber of votes cast for the	e amendment(s)	
☐ The amendment(s) was/were approved by must be separately provided for each voi				
"The number of votes cast for the ar	mendment(s) was/were suf	ficient for approval		
by	(voting group)	·"		
•	(voting group)			
☐ The amendment(s) was/were adopted by action was not required.	the board of directors with	out shareholder action a	and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without s	hareholder action and s	hareholder	
Dated	17,2013	_		
Signature	ET.			
(By a director, p	resident or other officer -			<del>_</del>
	incorporator – if in the han iary by that fiduciary)	ds of a receiver, trustee	, or other court	
	Majul	ASI )		_
	(Typed or printe	d name of person signir	<b>rg</b> )	
	P			_
	(Title of	person signing)		