

H190003534763ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

-		
7	_~	•
	v	

Division of Corporations

Fax Number : (

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : **I20000000019**Phone : (305)552-5973
Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future, annual report mailings. Enter only one email address please.\*\*

[hcm2	Address:				
cmall	Address:		 		

## COR AMND/RESTATE/CORRECT OR O/D RESIGN SARAVIAN MEDICAL GROUP CORP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

S. YOUNG

19 NFC - 6 PH L

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment to ... Articles of Incorporation

(Name	of Corporation as cu	rrently filed with the Flo	ride Dant of State)		
P19000055580		Avendy filed with the File	ida Dept. of State)		
	(Document Nur	nber of Corporation (if kno	own)		
tursuant to the provisions of section 607 as Articles of Incorporation:	.1006, Florida Statute	s, this <i>Florida Profit Corp</i> e	oration adopt: the following am	endme	ent(s)
. If amending name, enter the new n	ame of the corporati	on:			
ume must be distinguishable and contain	the word "corporation	on," "company," or "incor		new orn "	
Inc.," or Co.," or the designation "( chartered," "professional association,"	JOPP. INC. OF "C.	O A DEDIESSIANAL CARR	pration name must contain the	word	1
Enter new principal office address.	if applicable:	N/A			
Principal office address MUST BE A S	TREET ADDRESS)		771	5	
			:	)30	٠,٠
Enter new mailing address, if appl (Mailing address MAY BE A POST	cable:	N/A		တ်	
marke 71 ogr	OT FICE BUX	· · · · · · · · · · · · · · · · · · ·		Ϋ́	
		<del></del>		<del>- 10</del>	
. If amending the registered agent ar	d/or registered affic	address in Florida and		ىب_	
new registered agent and/or the new	v registered office ad	dress:	r the name of the		
Name of New Registered Agent	Lazara M Roque				
	134 E 49th St				
		ida street address)			
M. n. r. tom .r.	Hialeah	(City)	33013 Flo ida		
New Registered Office Address:					

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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 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	PI	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
	,		
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Lazara M Roque	134 E 49th S t
X Add			Hialeah Fl 33013
Remove			
X 2) Change	VP	Carlos Javier Cepero	134 E 49th 51
Add			Hialeah Fl 33013
Remove Change	<u></u> .		
Add			
Remove			
4) Change	<del></del>		
Add			
Remove		1	
5) Change	<del></del>		
Add			
Remove			
6) Change	<del>~</del>		
Add			
Remove			
		Page 2 of 4	
E. If amending or od	dina eddiri	ional Articles, anter change (s) house	

Ŀ,	If amending or adding additional Arti-	cles, enter change(s) here:
		(Be specific)

N/A		
		<del></del>
		_
		<del></del>
	· ·	
(if not applicable, indicate N/A) A		
_		
	Page 3 of 4	
•	12/04/2019	
date of each amendment(s) adoption: this document was signed.	12072017	if other than
12/04/2010		
ective date if applicable:	(no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were at by the shareholders was/were:	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes can	st for the amendment(s) was/were sufficient for approval
by	
•	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
12/04/20 Dated	
selec	director, president or other officer - if directors or officers have not t een ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Lazara M Roque
	(Typed or printed name of person signing)
	President
	(Title of person signing)