P98000016443

(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:

Michelle w/ E. Steven Lauer
advised to add the Adoption date to Amend.
1a

Office Use Only

Amend/Name Chg
1a 7.25.07

700106292477

07/19/07--01035--002 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUL 19 PM 1:00

E. STEVEN LAUER, PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW

3426 Ocean Drive
P.O. Box 3343
Vero Beach, FL 32964-3343
772-234-4200
Fax 772-234-4249
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July 17, 2007

E. Steven Lauer
Certified Will, Trusts & Estates Specialist
Certified Tax Specialist
772-234-4200
slauer@verolaw.org

Certified Mail, # 7006-3450-0000-7075-8080
Return Receipt Requested

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Vero Professional Properties, Inc.
Glendale Medical Properties, Inc.

Dear Sir or Madam:

Enclosed for filing please find the following documents:

1. Articles of Amendment to Articles of Incorporation of Vero Professional Properties, Inc.

2. Statement of Change of Registered Office or Registered Agent or Both for Corporations.

3. A check in the amount of $70.00 made payable to the "Florida Department of State" as payment for the filing fees of the above documents.

If you have any questions, please do not hesitate to contact me.

Sincerely,

E. Steven Lauer

ESL/mjd
Enclosures

cc: Charles Sullivan, Jr.
Joan Frazier

Articles of Amendment
to
Articles of Incorporation
of

Vero Professional Properties, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P98000016443

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

GLENDALE MEDICAL PROPERTIES, INC.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Article II. Principal Office. The principal place of business of this corporation shall be:

1601 20th Street, Vero Beach, Florida 32961

The mailing address of this corporation shall be:

1601 20th Street, Vero Beach, Florida 32961

(Attach additional pages if necessary)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUL 19 PM 1:00

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: July 17, 2007

Effective date if applicable: ______________________

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- [x] 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)

Charles Sullivan, Jr.

(Typed or printed name of person signing)

Director

(Title of person signing)

FILING FEE: $35