## P04000029964

(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:





900035804969

06/17/04--01033- 007 \*\*10.00

05/13/04--01035--003 \*\*25.00



DE 6/17

May 11, 2004

To Whom It May Concern:

Enclosed is the form for Articles of Amendment to Articles of Organization of "Sara Bernstein, PA", changing the name to "Sara Bernstein, MD, PA".

My address is as follows:

11924 Forest Hill Boulevard Suite 22, Number 313 Wellington, Florida 33414

You may contact me at:

Tel: (561) 889-9190 Fax: (775) 262-0538

Sincerely,

Sara Bernstein, MD



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 18, 2004

SARA BERNSTEIN, MD 11924 FOREST HILL BLVD. SUITE 22, NUMBER 313 WELLINGTON, FL 33414

SUBJECT: SARA BERNSTEIN, P.A.

Ref. Number: P04000029964

We have received your document for SARA BERNSTEIN, P.A. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

THE ABOVE ENTITY IS NOT A LIMITED LIABILITY CORPORATION. THE WRONG FORM WAS SUBMITTED.

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

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) 245-6880.

Karen Gibson Document Specialist

Letter Number: 104A00034774

•	
• • •	Articles of Amendment to
	Articles of Incorporation 04 ////
	of Stor PM 2
Sam	Articles of Amendment  to  Articles of Incorporation  of  SECRETARY  TALLAHASSEE, FLORID,  orporation as currently filed with the Florida Dept. of State)
(Name of co	rporation as currently filed with the Florida Dept. of State)
	.,,,,,
2040	00029964
	(Document number of corporation (if known)
4	tion 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> t(s) to its Articles of Incorporation:
NEW CORPORATE NAME (	if changing):
Sara J.	Bernstein, m.D., P.A.
(must contain the word "corporation,"	"company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
	(OTHER THAN NAME CHANGE) Indicate Article Number(s) ended, added or deleted: (BE SPECIFIC)
and or remote remotely being dame	(SS OF SOURCE)
	(Attach additional pages if necessary)
	change, reclassification, or cancellation of issued shares, provisions t if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: June 9, 2004
Effective date if applicable:
(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.
Signed this 9th day of June, 2004.
(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)
Sara J. Bernstein (Typed or printed name of person signing)
President (Title of person signing)

FILING FEE: \$35