## 465803

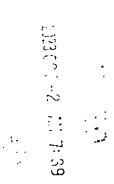
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## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

NAME OF CORPORATION: NEPHROLOGY	ASSOCIATES OF CENTI	RAL FLORIDA, P.A.				
DOCUMENT NUMBER: 465803	· · · · · · · · · · · · · · · · · · ·					
The enclosed Articles of Amendment and fee are	submitted for filing.					
Please return all correspondence concerning this m	natter to the following:					
Cynthia Barnett Hibnick, E	sq.					
	Name of Contact Perso	DII				
Lubell   Rosen						
<del></del>	Firm/ Company	1.41.				
200 S. Andrews Ave Suite	200 S. Andrews Ave Suite 900					
· · · · · · · · · · · · · · · · · · ·	Address					
Fort Lauderdale, FL 33301						
	City/ State and Zip Coo	le				
cbh@lubellrosen.com						
E-mail address: (to be	used for future annual report	t notification)				
For further information concerning this matter, plea	ase call:					
Cynthia Barnett Hibnick, Esq.	at ( 305	671-7771				
Name of Contact Person	at () Area Code & Daytime Telephone Numbe					
Enclosed is a check for the following amount made	payable to the Florida Dep	arunent of State:				
■ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810				

Tallahassee, FL 32303

## Articles of Amendment

Articles of Incorporation of

	NIKAL FICIRIDA PA	4423 (07-2
	of Corporation as currently filed with	the Florida Dent of State)
65803	A COMPONENTIAL AS CULTERATO INEC WILL	i the Florida Dept. of State)
	(Document Number of Corporation	on (if known)
rrsuant to the provisions of section 607. Articles of Incorporation:	·	ofit Corporation adopts the following amendment
If amending name, enter the new na	me of the corporation:	
me must be distinguishable and contain nc.," or Co" or the designation "C hartered," "professional association,"	OPD. "Inc." or "Co" A profession	The new or "incorporated" or the abbreviation "Corp" mul corporation nume must contain the word
Enter new principal office address, i rincipal office address <u>MUST BE A ST</u>	f applicable: FREET ADDRESS )	
Enter new mailing address, if applie (Mailing address MAY BE A POST C	OFFICE BOX)	
new registered agent and/or the new	registered office address:	da, enter the name of the
Name of New Registered Agent	Kimberly McCumber	
	807 S. Orlando Avenue, Suite C	
<del>-</del> -		
<del>-</del> -	(Florida street address)	
-	(Florida street address) Winter Park, FL	. Florida <sup>32789</sup>

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_	<u> </u>	
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
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1) Change		_		
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i) Change		_		
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If an amendment provides for an exchange	ange, reclassification, or cancellation of issued shares.
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provisions for implementing the amer	ange, reclassification, or cancellation of issued sbares.  Idment if not contained in the amendment itself:

The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, to Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer.	adopted by the shareholders. The number of votes cast for the amend sufficient for approval.	ment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following s for each voting group entitled to vote separately on the amendment(s)	tatement :
"The number of votes o	ast for the amendment(s) was/were sufficient for approval	
bv	,,	
<u> </u>	(voting group)	
DatedA	un (	
sele	director, president or other officer – if directors or officers have not sted, by an incorporator – if in the hands of a receiver, trustee, or other pinted fiduciary by that fiduciary)	been r court
	Uday Ranjit, M.D.	
	(Typed or printed name of person signing)	<del> </del>
	President	
	(Title of person signing)	