

597201

(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:

CF

Acc

Office Use Only



200394011362

09/14/22--01010--017    \*\*43.75

FILED  
SECRETARY OF STATE  
OFFICE OF CORPORATIONS  
2022 SEP 14 PM 3:36

SEP 18 2022

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Neubauer Hyperbaric Neurologic Center Inc

DOCUMENT NUMBER: 597201

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leah Rodas  
Name of Contact Person  
Neubauer Hyperbaric Neurologic Center Inc  
Firm/ Company  
660 S. Federal Hwy Suite 100  
Address  
Pompano Beach, FL 33062  
City/ State and Zip Code  
Lrodas@oceanhbo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leah Rodas at ( 954 ) 771-4000  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee       \$43.75 Filing Fee & Certificate of Status       \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)       \$52.50 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

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Neubauer Hyperbaric Neurologic Center Inc

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

597201

(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:

**A. If amending name, enter the new name of the corporation:**

Not Applicable

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

Not Applicable

**B. Enter new principal office address, if applicable:**

*(Principal office address **MUST BE A STREET ADDRESS**)*

Not Applicable

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent*

Not Applicable

*(Florida street address)*

*New Registered Office Address:*

*(City)*

*Florida*

*(Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*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*

**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:**

Change                      PT        John Doe

Remove                        V         Mike Jones

Add                              SV        Sally Smith

| <u>Type of Action</u><br>(Check One)    | <u>Title</u>    | <u>Name</u>                   | <u>Address</u>                      |
|---|-----------------|-------------------------------|-------------------------------------|
| 1) <input type="checkbox"/> Change      | <u>Director</u> | <u>Emilio E. Castaneda MD</u> | <u>660 S Federal Hwy, Suite 100</u> |
| <input checked="" type="checkbox"/> Add |                 |                               | <u>Pompano Beach, FL 33062</u>      |
| <input type="checkbox"/> Remove         |                 |                               |                                     |
| 2) <input type="checkbox"/> Change      |                 |                               |                                     |
| <input type="checkbox"/> Add            |                 |                               |                                     |
| <input type="checkbox"/> Remove         |                 |                               |                                     |
| 3) <input type="checkbox"/> Change      |                 |                               |                                     |
| <input type="checkbox"/> Add            |                 |                               |                                     |
| <input type="checkbox"/> Remove         |                 |                               |                                     |
| 4) <input type="checkbox"/> Change      |                 |                               |                                     |
| <input type="checkbox"/> Add            |                 |                               |                                     |
| <input type="checkbox"/> Remove         |                 |                               |                                     |
| 5) <input type="checkbox"/> Change      |                 |                               |                                     |
| <input type="checkbox"/> Add            |                 |                               |                                     |
| <input type="checkbox"/> Remove         |                 |                               |                                     |
| 6) <input type="checkbox"/> Change      |                 |                               |                                     |
| <input type="checkbox"/> Add            |                 |                               |                                     |
| <input type="checkbox"/> Remove         |                 |                               |                                     |



09/09/2022

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

09/09/2022

Effective 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 adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted 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)

Dated 09/09/2022 \_\_\_\_\_

Signature Luis G Rodas  
 (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)

Luis G Rodas  
 \_\_\_\_\_  
 (Typed or printed name of person signing)

President  
 \_\_\_\_\_  
 (Title of person signing)