657467

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R. HUNT 06/07/23

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NASIR KHALIDI	& SAKINA KHALIDI MI	D PA	
DOCUMENT NUM	657 167			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	SAKINA KHALIDI			
		Name of Contact Person	1 :.	2800
		Firm/ Company		
	3420 TAMIAMI TRAIL SU	UTE 3	`;	로 2 <u>연합</u> 교육
		Address		
	PORT CHARLOTTE FL 339	952	;	gara on on
	.	City/ State and Zip Cod	e	PH 6: 52
	SAKINA9@YAHQO.COM			, <u>w</u> ,
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call: at (941	_\ 769-9100	
Name	of Contact Person	Area Co	de & Daytime Telephone Nur	nber
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
	endment Section ision of Corporations		ment Section on of Corporations	
	. Box 6327		entre of Tallahassee	
Tall	ahassee, FL 32314	2415 7	N. Monroe Street, Suite 810)

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NASIR KHALIDI & SAKINA KHALIDI MD PA

(Name of Corpor	on as currently filed with the Florida Dept. of State)	<u> </u>
657467		
(Do	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following	g amendment(s)
A. If amending name, enter the new name of th	orporation:	
SAKINA KHALIDI MD PA		The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the al	orporation," "company," or "incorporated" or the abbreviatio or "Co". A professional corporation name must contain viation "P.A."	n "Corp.," the word
B. Enter new principal office address, if applica	. N/A	
(Principal office address <u>MUST BE A STREET</u>)		
	وره در از	'-:, (
C. Enter new mailing address, if applicable:	<u>اها.</u> ابر در	4 ∳ ************************************
(Mailing address MAY BE A POST OFFICE	<u>X</u>)	
	2017年 - 2017年	£ 6]
	ت ين ق	
	<u> </u>	
D. If amending the registered agent and/or reginew registered agent and/or the new register	red office address in Florida, enter the name of the	
N1/A	<u> </u>	
Name of New Registered Agent NIA		
	(Florida street address)	
	PL 23-	
New Registered Office Address:	(City) Florida (Zip C	ode)
	(100)	·
New Registered Agent's Signature, if changing		
nereby accept the appointment as registered agei	I am familiar with and accept the obligations of the position.	
	ture 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add X Remove			
2) Change			
Add			
Remove 3) Change			20-51
Add			
Remove			- 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)			
N/A			
		<u>.</u>	
	<u> </u>		
			
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		6 : 53	
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F. If an amendment provides for an 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)			
N/A			
· · · · · · · · · · · · · · · · · · ·			
<u> </u>			
			

The date of each amendmen	t(s) adoption: <u>06/01/2023</u>	, if other than th
date this document was signed	i.	
Effective date if applicable:	06/01/2023	
	(no more than 90 days after amendment file date)	-
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action	and shareholder
☑ The amendment(s) was/web by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
must be separately provide	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s): cast for the amendment(s) was/were sufficient for approval	2000 CO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Dated 06/0	(voting group)	o H G
Signature	S Khalidi	ပာ ယ
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	SAKINA KHALIDI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	-