GT18693

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	MOSHER PI	ERESS, M.D., P.A.		
DOCUMENT NUMBER:	G 78693			
The enclosed Articles of Amendm	ent and fee are su	ibmitted for filing.		
Please return all correspondence c	oneerning this ma	tter to the following:		
	Sharon Peres	s		
		Name of Contact Per	rson	
		Firm/ Company		
	875 Meadow	s Road, Suite 334		
-		Address	, ,	
	Boca Raton,			
		City/ State and Zip C	ode	
		s@gmail.com		
E-mail	address: (to be us	sed for future annual rep	ort notification)	
For further information concerning	this matter, pleas	se call:		
Debbie Renken		at (561	394-7910	
Name of Contact P	erson	Area	Code & Daytime Telephone Number	
Enclosed is a check for the following	ng amount made	payable to the Florida D	epartment of State:	
	75 Filing Fee & ficate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations		Ame Divi	ret Address codment Section (sion of Corporations	
P.O. Box 6327 Tallahassee, FL	32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

MOSHER, PERESS, M.D., P.A.

	1 14 17
(Name of Corporation as currently	illed with the Florida Dept. of State)
G72693	
(Document Number of C	Orporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
BOCA FERTILITY, INC.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MINDER 26 PH
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	•
eFloridu stree.	address)
New Registered Office Address:	, Florida
ıC	uvi (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	
Signature of New Reg	istered Agent, if changing

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 = Prustee; C = Chairman or Clerk; CEO = ChiefExecutive 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 Doc	
X Remove	<u>Y</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	V/S	Sharon Peress	875 Meadows Road
XAdd			Suite 334
Remove			Boca Raton, FL 33486
2) Change	******		
Add			
Remove			
3) Change		···	
Add			
Remove			
4) Change			
Add			
Remove			
51 Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Bu specific)				
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If an amendment provides for an exch	ange, reclassificat	ion, or cancella	ion of issued shi	ares,	
provisions for implementing the amer	ange, reclassificated	ion, or cancella tained in the am	ion of issued shi endment itself:	ares,	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassificat idment if not cont	ion, or cancella tained in the am	ion of issued shi endment itself:	ares,	
provisions for implementing the amer	ange, reclassificated and ment if not continued to the continued and the continued a	ion, or cancella wined in the am	tion of issued shi endment itself:	ares,	
provisions for implementing the amer	ange, reclassificat adment if not com	ion, or cancella tained in the am	tion of issued shi endment (tself:	ares,	
provisions for implementing the amer	ange, reclassificated and ment if not conf	tained in the am	endment (tself:	ares,	
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provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the am	endment (tself:		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: ino more than 90 days after amendment file date)	
ino 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 document's effective date on the Department of State's records.	are will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	(8)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"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 sharehold action was not required.	ler
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
X Dated	
X Signature Males MM w/	
(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 cou appointed fiduciary by that fiduciary)	
Moshe R. Peress, M.D.	
(Typed or printed name of person signing)	
President	
(Title of person signing)	