## H10052

(Re	equestor's Name)	
(Ad	ddress)	
. (Ac	ddress)	
(Ci	ity/State/Zip/Phone #)	·····
PICK-UP	☐ WAIT	MAIL .
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ALLAHASSEE, FLANSA

T. LEWIEUX

## **COVER LETTER**

TO: Amendment Section Division of Corporations RUSSO AND ELLIOT, D.M.D., P.A. NAME OF CORPORATION: \_\_\_ H10052 DOCUMENT NUMBER: \_\_\_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROBERT S. ZIPPIN, ESQUIRE Name of Contact Person ROBERT STEWART ZIPPIN, P.A. Firm/ Company 7101 W. McNab Road, Suite 200 Address Tamarac, FL 33321 City/ State and Zip Code Charles48@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Robert S. Zippin, Esq. 720-1776 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:

**Mailing Address** 

\$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

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(Additional copy is

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Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□\$52.50 Filing Fee

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Certificate of Status

## Articles of Amendment to Articles of Incorporation of

RUSSO AND ELLIOT, D	.M.D., P.A.	
(Name of Corporation as	currently filed with the Florida Dept. of State)	
Н10052	•	
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607.19 its Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follo	wing amendment(s)
A. If amending name, enter the new nan	ne of the corporation:	
CHARLES D. RUSSO,	D.M.D., P.A.	The new
	iin the word "corporation," "company," or "incorporated" or th tion "Corp," "Inc," or "Co". A professional corporation name m on," or the abbreviation "P.A."	e abbreviation
B. Enter new principal office address, if (Principal office address <u>MUST BE A STI</u>		
		<del></del>
C. Enter new mailing address, if applica (Mailing address MAY BE A POST Of		
	<u> </u>	
D. If amonding the registered agent and	or registered office address in Florida, enter the name of the	
new registered agent and/or the new		•
Name of New Registered Agent	Robert Stewart Zippin, P.A.	
	7101 W. McNab Road, Suite 200	
_	(Florida street address)	
New Registered Office Address:	Tamarac ,Florida 33321	<del></del>
	(City) (Zip Code)	
	•	
New Registered Agent's Signature, if cha	nging Registered Agent:	
hereby accept the appointment as register	ed agent. I am familiar with and accept the obligations of the position	>
( Sign	ature of New Registered Agent, if changing	
		<sup>5</sup> ♀ ₹ ጠ
	~ 7 ~	

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	PT · John Doe	
X Remove	V <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
I) Change	V <u>PD</u> Je <u>ffrey F. Ell</u>	iot, D.M.D. 2801 University Dr.
Add		Suite 102
X Remove		<u>Coral Springs.</u> FL 3306
2) X Change	DPSTV Charles D. Russ	o, D.M.D. 2801 University Drive
Add		Suite: 102
Remove		Coral Springs, FL 33065
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change	<u> </u>	
Add		
Remove		<del> </del>
6) Change		<u> </u>
Add`		
Remove		

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:
Effective date if applicable: January 1, 2013  (no more than 90 days after amendment file date)
(no more than 50 days after amenament file date)
Adoption of Amendment(s) (CHECK ONE)
☐ 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)
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.  Jan 23, 2013
Signature Mare Dur Du
(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)
Charles D. Russo, D.M.D.
(Typed or printed name of person signing)
President
(Title of person signing)