## SWAINE, HARRIS & SHEEHAN, P.A.

ATTORNEYS AT LAW

BERT J. HARRIS, III J. MICHAEL SWAINE J. TIMOTHY SHEEHAN KIMBERLY L. SAPP

PLEASE REPLY TO: LAKE PLACID SEBRING

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425 SOUTH COMMERCE AVENUE SEBRING, FL 33870-3702 (863) 385-1549 FAX: (863) 471-0008 E-MAIL shsmlaw@strato.net

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LAKE PLACID, FL 33852-6561
(863) 465-2811
FAX: (863) 465-6999
E-MAIL lplaw@strato.net

Division of Corporations Department of State P.O. Box 6327 Tallahassee, FL 32314

Re:

S. Allen Skipper, M.D., P.A. Our File No. 4025-001

Gentlemen:

900004478139--2 -07/16/01--01118--007 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Enclosed are the original and one copy of the proposed Articles of Amendment of the Articles of Incorporation of S. Allen Skipper, M.D., P.A. Please approve and file the original, file stamp the copy and return it to our office. Also enclosed is their check in the amount of \$35.00 for your filing fee.

If you have any questions or if anything further is required, please contact me.

Sincerely yours,

J. Michael Swaine

SIGNED IN MR. SWAINE'S ABSENCE TO AVOID DELAY IN MAILING

JMS:tw Enclosure

cc: S. Allen Skipper

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## ARTICLES OF AMENDMENT **OF** THE ARTICLES OF INCORPORATION

**OF** 

S. ALLEN SKIPPER, M.D., P.A.

The Articles of Incorporation of S. ALLEN SKIPPER, M.D., P.A., a Florida corporation, are amended as follows:

Article I of the Articles of Incorporation is hereby amended to read as follows:

The name of this corporation is HIGHLANDS SURGICAL ASSOCIATES, P.A.

All other provisions of the Articles of Incorporation shall remain unchanged.

This Amendment was approved, in writing, by the directors and stockholders of the corporation by Agreement dated the /2 day of July, 2001.

**DATED** this <u>/2</u> day of July, 2001.

ATTEST:

L. Skipper, Secret

STATE OF FLORIDA **COUNTY OF HIGHLANDS** 

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared S. Allen Skipper, President and Virginia L. Skipper, Secretary of S. ALLEN SKIPPER, M.D., P.A., a Florida corporation, known to me to be the persons described in and who executed the foregoing instrument in the name of that corporation, and they acknowledged before me that they executed the same on behalf of said corporation, and that they were authorized by said corporation to do so.

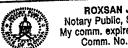
WITNESS my hand and official seal in the State and County named above, this \( \lambda \) day of July, 2001.

Notary Public, State of Florida at Large

Printed Name:

Commission No

Expires:



ROXSAN JACKSON Notary Public, State of Florida My comm. expires Jan. 28, 2004 Comm. No. GC905453