K74482

(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:

Office Use Only

100180703901

12/30/10--01008--016 **35.00

FILED
10 DEC 29 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
CRC 12/30

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2010

JEFF GREEN
METRO MEDICAL PLAZA, INC.
13691 METRO PARKWAY SOUTH, SUITE 300
FT. MYERS, FL 33912

SUBJECT: METRO MEDICAL PLAZA, INC.
Ref. Number: K74482

Upon receipt of your letter and/or check(s) totaling $105.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

ARTICLES OF AMENDMENT MAY BE SUBMITTED TO REMOVE AN OFFICER,ADD AN OFFICER OR CHANGE OFFICERS. THIS ONE FORM AND $35.00 MAY BE SUFFICIENT FOR YOU CHANGES.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is $35. Certified copies are optional and are $8.75 for the first 8 pages of the document, and $1 for each additional page, not to exceed $52.50.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 710A00028757

RECEIVED
10 DEC 29 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: METRO MEDICAL PLAZA, INC

DOCUMENT NUMBER: K74482

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

Please return all correspondence concerning this matter to the following:

JEFF GREEN
Name of Contact Person

METRO MEDICAL PLAZA, INC
Firm/ Company

13691 METRO PARKWAY SOUTH SUITE 300
Address

FT MYERS, FL 33912
City/ State and Zip Code

RXDOC3333 @ AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEFF GREEN at (239) 878-8314
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

METRO MEDICAL PLAZA, INC

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

K74482

(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:

_____

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."

FILED
2009 APR 29 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

_____

_____

_____

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: _____

New Registered Office Address: _____ *(Florida street address)*

_____, Florida_____
(City) *(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

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)

Title	Name	Address	Type of Action
P	JOSEPH J. HOLMES JR	13691 METRO PKWY S. SUITE #300 FT MYERS, FL 33912	☐ Add ☒ Remove
P	JEFF GREEN	13691 METRO PKWY S SUITE #300 FT MYERS, FL 33912	☒ Add ☐ Remove
			☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: 12/27/2010
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment 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.

Dated 12/27/2010

Signature Jeff Green
(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)

JEFF GREEN
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)