# LU2875

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Cf 5/14/2025

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Alan S. Grossman, O.D. P.A. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SCOTT Grossman Firm/ Company 18557 W. Dixie Highway Miami FL 33180
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SCOTT Grossman at (305) 335-1607

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: □\$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

### Mailing Address

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

### Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# Articles of Amendment to Articles of Incorporation of

FILED

Alan S. Grossman O.C	D. PA.	
(Name of Corporation as currently	filed with the Florida Dep	or. Westere T AM 1: 24
L 07875		SECRETARY OF STATE
(Document Number of	Corporation (if known)	TALLADASSER, FL
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation s	dopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
Scott and Alan Grossman	O.D. P. A	The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A."	mpany," or "incorporated"	or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  Note: Name of New Registered Agent	ess in Florida, enter the na	ime of the
,		
(Florida stre	et address)	
New Registered Office Address:		, Florida
New Registered Office numess.	Ciņ)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligatio	
Signature of New Re	gistered 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:

(Anach 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.

Example: 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)	<u>Title</u>	<u>Name</u>	NIV	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change	····			
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				<u></u>
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)			
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			. # !	
f an amendment provides for an exc	hange, reclassifica	tion, or cancellatio	n of issued snares,	
provisions for implementing the am	hange, reclassifica endment if not con	tion, or cancellation tained in the amen	n or issued snares, idment itself:	
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation tained in the amer	n of issued snares, idment itself:	
provisions for implementing the am	change, reclassifica lendment if not con	tion, or cancellation trained in the amer	n of issued snares, idment itself:	
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provisions for implementing the am	change, reclassifica	tion, or cancellation tained in the amer	n of issued snares, idment itself:	

•

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
•	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the a flicient for approval.	mendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	ving statement sent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
, <u></u>	(voting group)	
Dated 03	3-21-2025 Lames	
(By a di selected	rector, president or other officer – if directors or officers have it, by an incorporator – if in the hands of a receiver, trustee, of the fiduciary by that fiduciary)	re not been or other court
	Scott Grossman (Typed or printed name of person signing)	
	DPST	
	(Title of person signing)	