## L51587

- (Requ	estor's Name)	
···		
(Addre	ess)	
<del></del>		
(Addre	ess)	
<u> </u>		
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ess Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	
		Ì

Office Use Only



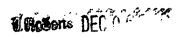
100082018721

12/04/06--01032--012 \*\*35.00

NC/ Amoul

JECKETARY OF STATE

ורגט



December 1, 2006

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION:	JULIAN ABICH, M.D. INC.	
DOCUMENT NUI	MBER:L51589		
The enclosed Article	les of Amendment and fee	e are submitted for filing.	
Please return all con	respondence concerning	this matter to the following:	
	CHARLES J.	DIPARDO, CPA	
	(Nam	ne of Contact Person)	
	EDWIN ANDREV	WS AND COMPANY, P.A.	
•	(	Firm/ Company)	<del></del>
	6574 N. STA	TE ROAD 7, PMB 115	
	, .	(Address)	
.`		ODEEK EL 00070 0005	
		CREEK, FL 33073-3625  / State and Zip Code)	· · · · · ·
For further information	tion concerning this matte	•	
CHARLES J. DIPAR	<del></del>	at ( 954 ) 753-5900	
(Name	of Contact Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check	for the following amount	•	
☑ \$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 Ad Amendment Division of 6 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

OT .	<i>D</i>
JULIAN ABICH, M.D. INC.	OF DEC TILED
JULIAN ABICH, M.D. INC.  (Name of corporation as currently filed with the Florida Dept. of Sta  L51589  (Document number of corporation (if known)	OGOEC FILED  Atelography OF S. 30
L51589	SEE, FLORTE
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida P</i> adopts the following amendment(s) to its Articles of Incorporation:	rofit Corporation
NEW CORPORATE NAME (if changing):	
JULIAN ABICH, M.D., P.A.	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp (A professional corporation must contain the word "chartered", "professional association," or to	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	e Article Number(s)
ARTICLE III IS AMENDED TO READ AS FOLLOWS	•
THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS	THE PRACTICE
OF MEDICINE AS A PROFESSIONAL SERVICE CORPORATION.	
	<del> </del>
	<del></del>
(Attach additional pages if necessary)	<u> </u>
If an amendment provides for exchange, reclassification, or cancellation of issufor implementing the amendment if not contained in the amendment itself: (if no	

(continued)

The date of each amendment(s) adoption: NOVEMBER 29, 2006
Effective date if <u>applicable</u> : NOVEMBER 29, 2006  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signature  (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)
JULIAN ABICH
(Typed or printed name of person signing)
PRESIDENT

FILING FEE: \$35

(Title of person signing)