

1162597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

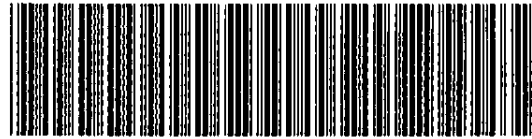
(Document Number)

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



900190715979

01/13/11--01016--027 \*\*43.75

*Amend*  
*SG*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 JAN 13 AM 10:09

FILED

1-1421



**JACK I. NEWCOMER MD P.A.**

3347 State Road 7 Suite 200  
Wellington, Florida 33449  
Phone 798.2800 Fax 793.6631

January 11, 2011

To whom it may concern,

Please make these changes to our corporation as soon as possible.

Best regards,

A handwritten signature in black ink, appearing to read "Jason Newcomer".

Jason Newcomer

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Jack I. Newcomer, M.D., P.A.

DOCUMENT NUMBER: M62597

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

Please return all correspondence concerning this matter to the following:

Jason Newcomer  
Name of Contact Person

Jack I. Newcomer M.D. P.A.  
Firm/ Company

3347 State Road 7 suite 200  
Address

Wellington, FL 33449  
City/ State and Zip Code

Jdolphin88@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Newcomer at ( 561 ) 798.2800  
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

Jack I. Newcomer M.D. P.A.

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

M62597

(Document Number of Corporation (if known))

FILED  
2011 JAN 13 AM 10:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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."

**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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> 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)

There will be a redistribution of shares in Jack I. Newcomer M.D.P.A.  
 The redistribution will be as follows: Jack I. Newcomer (President)  
 will retain 15% of shares in corporation. Margarita Gonzalez (Vice President)  
 will retain 5% of shares in corporation. Jason Newcomer (Treasurer)  
 will now have 80% of shares in corporation. Change effective Jan 1, 2011.

The date of each amendment(s) adoption: January 1, 2011  
(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 January 1, 2011

Signature Jack Irwin Newcomer (Pres)  
(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)

Jack Irwin Newcomer MD Pres  
(Typed or printed name of person signing)

President  
(Title of person signing)