N03000003108

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14 MAY 20 PH & 12

Amend CC a 4.3.14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Primary Ca	re Medical Serv	vices of Poinciana, Inc.
DOCUMENT NUMBER: NO3000003	3108	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
John Amrhein		
	(Name of Contact Perso	n)
	(Firm/ Company)	
1875 Boggy Creek Road	d	
	(Address)	
Kissimmee, FL 34744		
	(City/ State and Zip Cod	le)
jamrhn2@yahoo.		
E-mail address: (to be use	-	notification)
For further information concerning this matter, please	e call:	
John Amrhein	_{at (} 407	740-5400 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	**S\$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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation

Primary Care Medical Services of Poinciana, Inc.

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

N03000003108

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corpo	ration:	m!	
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." o	The i	
B. Enter new principal office address, if applicable:	1875 Boggy Creek Road		
(Principal office address MUST BE A STREET ADDRESS	SS) Kissimmee, FL 34744		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1875 Boggy Creek Road		
(Maning marcos MATERIAL CONTROL DOLL)	Kissimmee, FL 34744		
D. If amending the registered agent and/or registered (office address in Florida, enter the name of the		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office			
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:			
new registered agent and/or the new registered office	ee address:		
new registered agent and/or the new registered office			
new registered agent and/or the new registered office Name of New Registered Agent:	ee address:		

Page 1 of 4

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)

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 X.Remove X. Add	<u>V</u> <u>Mil</u>	n <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	<u>T</u>	John Amrhein	752 Parrot Court
Add			Kissimmee, FL 34759
Remove			
2) Change	<u>D</u>	Arnim Watson	707 Toltec Place
Add			Kissimmee, FL 34758
A Remove 3) Change	D	Jeffery Goldmacher	4444 Cypress Mill Road
X Add			Kissimmee, FL 34746
Remove	_		
4) Change	<u>D</u>	Lisa D'Cato	612 Mesilla Drive
X Add			Kissimmee, FL 34758
Remove			
5) Change	D	Patricia McWhirther	200 Orange Avenue
X Add			St. Cloud, FL 34769
Remove			
б) Change			
Add			
Remove			

attach additional she	ng additional Art ets, if necessary).	(Be specific)	nge(s) nere.			
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: N/A	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	,
Dated November 12, 2013	
Signature May Day	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Mary Ann Barry	
(Typed or printed name of person signing)	
Board Chair	
(Title of person signing)	