N0900002121

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: Monroe Cou	inty Attack on Fat, Inc.	
DOCUMENT NUMBER:	N9000002121		
The enclosed Articles of A	mendment and fee a	are submitted for filing.	
Please return all correspond	lence concerning th	is matter to the following:	
Diane Tolbe	ert Covan, Esq.	of Contact Barcon)	
	(Name	of Contact Person)	
	(Fin	rm/ Company)	
<u>1901 Fogar</u>	ty Avenue, Suite	(Address)	
Key West, F		state and Zip Code)	
For further information con	cerning this matter,	please call:	
Diane T. Covan (Name of Contact	ct Person)	at (<u>305</u>) <u>293-1118</u> (Area Code & Daytime T	
Enclosed is a check for the	following amount n	nade payable to the Florida Depa	rtment of State:
	3.75 Filing Fee & rtificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Statu. Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	cle

Articles of Amendment to Articles of Incorporation of



	of	-0
Montore Constraint (Name of Corporation as current	ounty Attack on Fat, Inc.	State)
	N09000002121	_
	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		r Profit Corporation adopts
A. If amending name, enter the new name of	the corporation:	
Monroe County Attack on Fat, Inc	,	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." <u>"Company" o</u>	ontain the word "corporation" or "i	ncorporated" or the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
1 metpu office unaress MOST DE A STREET		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC		
		· · · · · · · · · · · · · · · · · · ·
		-
 If amending the registered agent and/or r new registered agent and/or the new regis 		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		, Florida
•	(City)	(Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered		cept the obligations of the
position.		
	ignature of New Registered Agent, if c	hanaina
Di Di	Zname oj men nezisterta azem, ij t	mmxmx

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>Name</u> Address Type of Action **Title** Bruce L. Boros, M.D. P, D 3401 Northside Drive 🖪 🖸 Add Key West FL 33040 Remove Victor Genchi, M.D. VP, D 🖪 🗹 Add 8 Boulder Drive Remove Key West FL 33040 Add Remove S, D Diane Tolbert Covan, Esq. 1901 Fogarty Avenue Suite_1 Key West, FL 33040 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Article III, which states the specific purpose for which this corporation is organized, is replaced in its entirety with the following: TO EDUCATE THE PUBLIC ON THE MEDICAL RISKS OF OBESITY AND IMPLEMENT PROGRAMS TO REVERSE THE EPIDEMIC OF CHILDHOOD AND TEENAGE OBESITY.

"Additional Sheet" to Articles of Amendment of Monroe County Attack on Fat, Inc.

D.

Additional Officers/Directors:

<u>Title</u>	Name	Address	Type of Action
T, D	Stewart Appelrouth, CPA	604 Duval Street Key West FL 33040	√ Add
D	Christina M. Boros	1709 Atlantic Boulevard Key West FL 33040	√ Add
D	Michael Cunningham	27453 St. Martin Lane Ramrod Key FL 33040	√ Add
D	Estrella Gutierrez	1300 15 th Court #71 Key West, FL 33040	√ Add

The date of each amendmen	t(s) adoption: March 4, 2009		
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.		
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.		
Dated_Mai	rch 4, 2009		
Signature	hold .		
(By	y the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, ouer court appointed fiduciary by that fiduciary)		
	Bruce L. Boros, M.D.		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

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