

N14000005199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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200274326972

*name change
as amended*

06/26/15--01023--006 **43.75

2015 JUN 26 PM 1:22
FILED
CLERK OF STATE
TALLAHASSEE, FLORIDA

JUL 07 2015
A RAMSEY

June 22, 2015

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

Re: Name change for N14000005199

Greetings!

My name is Cynthia S. Barry and I am Chairman of the Board for Sarasota Manatee Collaborative Professional Group, Inc.

I am enclosing the documents required for the Name change and am also enclosing a check signed by our President, Daniel Krieg.

Should you need anything further, please do not hesitate to contact me.

Kindest regards,



Cynthia S. Barry

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sarasota Manatee Collaborative Professional Group, Inc.

DOCUMENT NUMBER: N14000005199

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

Please return all correspondence concerning this matter to the following:

Cynthia S. Barry

(Name of Contact Person)

(Firm/ Company)

210 Magellan Drive

(Address)

Sarasota, Florida 34243

(City/ State and Zip Code)

csb@conflictssolvedbybarry.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia S. Barry

941

704-7146

at

(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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Sarasota Manatee Collaborative Professional Group Inc.

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

N14000005199

(Document Number of Corporation (if known))

FILED

2015 JUN 26 PM 1:22

CLERK OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Collaborative Professionals of Sarasota & Manatee, Inc.

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

210 Magellan Drive

Sarasota, FL. 34243

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

210 Magellan Drive

Sarasota, FL. 34243

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:

Cynthia S. Barry

210 Magellan Drive

(Florida street address)

New Registered Office Address:

Sarasota

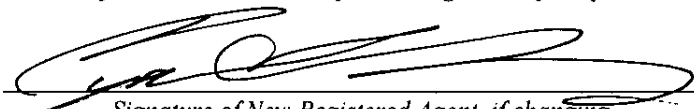
(City)

Florida 34243

(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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Daniel Krieg</u>	<u>210 Magellan Drive</u> <u>Sarasota, Fl.</u> <u>34243</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Faith Z. Lodder</u>	<u>5824 Lakewood Ranch Blvd. N</u> <u>Lakewood Ranch, FL.</u> <u>34240-8479</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Allan F. Baily</u>	<u>46 N. Washington Blvd.</u> <u>Ste. 18</u> <u>Sarasota, Fl. 34236</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Richard Ruhl</u>	<u>210 Magellan Drive</u> <u>Sarasota, Fl.</u> <u>34243</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>Cynthia S. Barry</u>	<u>210 Magellan Drive</u> <u>Sarasota, Fl.</u> <u>34243</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

[illegible]

June 12, 2015

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

June 12, 2015

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

June 12, 2015

Dated _____

Signature _____

(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)

Cynthia S. Barry

(Typed or printed name of person signing)

Chairman of the Board

(Title of person signing)