## PODOSHAB

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AUG 13 2014

R. WHITE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Profestocument Number: P000000		Associates, Inc.	
The enclosed Articles of Amendment and fed			
Please return all correspondence concerning	this matter to the following:		
Rosario Fel	1		
11000.701	Name of Contact Person	n	
<del>-</del>	Firm/ Company		
9 Middlesex	Street		
	Address		
Lowell, MA	01850		
	City/ State and Zip Cod	e	
rosario.fell.esq	@amail.com		
E-mail address: (	to be used for future annual report	notification)	
For further information concerning this matte	r. please call:		
Rosario Fell	at (978	, 970-0050	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount	made payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee □\$43.75 Filing F  Certificate of St		□\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

Articles of A		† † .	
Articles of In	•	14	
Professional Audiology Associates, I	-		<b>.</b> .
(Name of Corporation as currently filed with the		- A superior	
P0000041268	,	Chrispina ,	
(Document Number of Corporation (	if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporati	on adopts the following	amendment(s
A. If amending name, enter the new name of the corporation:			
			The new
word "chartered," "professional association." or the abbreviation	"P.A."		
	0400 On the L	IO I limbura 4	
	2103 South U	JS Highway 1	
	2103 South U Jupiter, FL		
(Principal office address MUST BE A STREET ADDRESS )  C. Enter new mailing address, if applicable:	Jupiter, FL		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Jupiter, FL	33477 JS Highway 1	
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)	Jupiter, FL 3	33477 JS Highway 1	
(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 add	Jupiter, FL 3  2103 South U  Jupiter, FL 3	33477 JS Highway 1 33477	
(Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Jupiter, FL 3  2103 South U  Jupiter, FL 3	33477 JS Highway 1 33477	
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 May agent and/or the new registered office address Name of New Registered Agent	Jupiter, FL 3	33477 JS Highway 1 33477	
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 registered agent and/or the new registered office address registered agent and/or the new registered office address registered Agent  2103 South U	Jupiter, FL 3  2103 South U  Jupiter, FL 3  Iress in Florida, enter the si	33477 JS Highway 1 33477	
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 May agent and/or the new registered office address Name of New Registered Agent  2103 South U  (Florida st	Jupiter, FL 3	33477 JS Highway 1 33477	
(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 registered agent and/or the new registered office address  Name of New Registered Agent  2103 South U	Jupiter, FL 3 2103 South U Jupiter, FL 3  Iress in Florida, enter the st.  S Highway 1  reet address)	33477 JS Highway 1 33477	

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: X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	se Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PTDS	Ellen Lynn Weinberg	-
Add  ✓ Remove			
2) Change	DPST	Jonathan Weizman	115 Route 46, Suite D25
Add			Mountain Lakes, NJ 07046
Remove 3) Change	DCEO	Amir Hadar	115 Route 46, Suite D25
Add			Mountain Lakes, NJ 07046
Remove			
4) Change			_
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding tach <i>additional sheets</i>	i, if necessary). (i	Be specific)	<u></u>		
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n amendment provi	das for on avahan	no madaccificati	on on someallativ	n of issued shor	
ovisions for impleme	enting the amendr	nent if not conta	ined in the amer	<u>on or issued snar</u> idment itself:	<u>es.</u>
(if not applicable, i	ndicate N/A)		<u></u>		
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		<del></del> -			
					<del></del>

The date of each amendment(s) adoption: July 25, 2014 date this document was signed.	, if other than the
Effective date if applicable: July 25, 2014	
(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 July 31, 2014	
Signature Jonahof Mynnen	
(By a fector, president or other officer—if directors—officers have not been	
selfed, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Jonathan Weizman	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	