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SECRETARY OF STATE TALLAHASSEE, FLORIDA

12/21/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: Hematolog	gy-Oncology Associates of I	Boca Raton, P ≙
DOCUMENT NUMBER:		P00000112942	
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
		Sunil Patel, MD	
	Ŋ	Name of Contact Person	
	Hematology-Onco	logy Associates of Boca Raton,	PA
		Firm/ Company	
	9970 Central Park Blvd. Suite 304		
		Address	
		ca Raton FL 33428	
	C	ity/ State and Zip Code	
_	officemana E-mail address: (to be use	ager@boca.fdn.com d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
	Sunil Patel, MD	at (2-6611
Name	e of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Departi	ment 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

FILED

2010 DEC 20 PH 2: 48

Hematology-Oncology Associates of Boca Raton, PA

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

SECRETARY OF STATE TALLAHASSEE, FLORID!

(Document Number of Corporation (if known) 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: 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>	Name · ·	<u>Address</u>	Type of Action
VP	Samarth Reddy, MD	9970 Central Park Blvd Suite 304 Boca Raton FL 33428	☑ Add ☐ Remove
<u>D</u>	Amish Patel	9970 Central Park Blyd Suite 304 Boca Raton FL 33428	
			Add Remove
	ding or adding additional Articles, edditional sheets, if necessary). (Be s		
provisio	nendment provides for an exchange ons for implementing the amendme or applicable, indicate N/A)	e, reclassification, or cancellation of not contained in the amendmen	issued shares, nt itself:

The date of each amendmen	t(s) adoption: 07/01/2010
Effective date if applicable:	(date of adoption is required)
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemed 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)
action was not required. The amendment(s) was/we	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
action was not required.	
Dated	12/15/10 Sul (60+8)
Signature _	
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Suníl Patel, MD
	(Typed or printed name of person signing)
	President
	(Title of person signing)