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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Amend
(1a) 6/23/08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Collier Endoscopy & Surgery Center, Inc.

DOCUMENT NUMBER: P01000036392

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

Please return all correspondence concerning this matter to the following:

JERALD R. PITKIN, ESQ.

(Name of Contact Person)

LAW OFFICE OF JERALD R. PITKIN, P.A.

(Firm/ Company)

1575 PINE RIDGE ROAD, SUITE 10

(Address)

NAPLES, FLORIDA 34109

(City/ State and Zip Code)

For further information concerning this matter, please call:

JERALD R. PITKIN, ESQ.

(Name of Contact Person)

at (239) 449-4460

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2008

JERALD R. PITKIN, EDQ.
LAW OFFICE OF JERALD R. PITKIN, P.A.
1575 PINE RIDGE ROAD - SUITE 10
NAPLES, FL 34109

SUBJECT: COLLIER ENDOSCOPY & SURGERY CENTER, INC.
Ref. Number: P01000036392

We have received your document for COLLIER ENDOSCOPY & SURGERY CENTER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 008A00035491

**Articles of Amendment
to
Articles of Incorporation
of**

Collier Endoscopy & Surgery Center, Inc.

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

P01000036392

(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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

ARTICLE I - NAME AND ADDRESS: The principal business address of the corporation shall be

3439 Pine Ridge Road, Naples, FL 34109

ARTICLE V - REGISTERED AGENT AND OFFICE: JERALD R. PITKIN, ESQ.,

LAW OFFICE OF JERALD R. PITKIN, P.A., 1575 PINE RIDGE ROAD, SUITE 10, NAPLES, FL 34109

ARTICLE VI - DIRECTORS: SHARDUL NANAVATI, M.D., 1575 PINE RIDGE ROAD, SUITE 10, NAPLES, FL 34109

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

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DIVISION OF CORPORATIONS
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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

1. The name of the Corporation is Collier Endoscopy & Surgery Center, Inc.
2. The name and address of the registered agent and office is:

Jerald R. Pitkin, Esq.
c/o Law Office of Jerald R. Pitkin, P.A.,
1575 Pine Ridge Road
Suite 10
Naples, Florida 34109

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent, as provided for in Chapter 608 of the Florida Statutes.

Dated effective as of May 29, 2008.



Jerald R. Pitkin, Esq.
Initial Registered Agent

The date of each amendment(s) adoption: MAY 29, 2008

Effective date if applicable: MAY 29, 2008
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved 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.

Signature _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Shardul Nanavati, M.D.

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

FILING FEE: \$35