

(Requestor's Name)				
(Address)	·			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Sta	atus			
Special Instructions to Filing Officer:				
, <u>, , , , , , , , , , , , , , , , , , </u>				

Office Use Only



000264722740

000264722740 09/29/14--01053--014 **43.75

THE SER 29 M 9:52.

WHITE SER 29 M 9:52.

WHITE SER 29 M 9:52.

....

OCT 9 2014

R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Fernando Lopez, Inc NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wanda O'Neill Name of Contact Person Firm/ Company 11399 Lake Underhill Rd

Address

Orlands FL 32825

City/ State and Zip Code Wanda. oneill @ obgyncfl. com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Wanda O'Neill at (407) 207 - 5037

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fee & □ \$35 Filing Fee □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

	,	* (** £2\$	11g 13	
Articles of Am	sendment	, 	5	
to Articles of Inco	rnoration	FILE	U	
of	14	SER 29	AM 9:52	
Fernando Lopez, Ir	nc :	NACTABY D		
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	<u>LÄUASSEE</u>	REORIDAL	
P01000078179	•		•	
(Document Number of Corporation (if)	known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corpord	ation adopts t	ne following amendme	nt(s) to
A. If amending name, enter the new name of the corporation:				
Povisil Enterprises,	Inc.		The new	,
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or " o". A professional			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
C. Enter new mailing address, if applicable:		1	A 43 F	
(Mailing address MAY BE A POST OFFICE BOX)	1445 Be OVIEDO	00KS V	ATIVE	
	_ OVIFDO	tuo	RIDA	
		32765		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter	the name of t	<u>he</u>	
Name of New Registered Agent				
(Florida stree	et address)			
New Registered Office Address:		Florida		
(City)			ip Code)	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obt	ligations of th	e position.	
Signature of New Registered Ag	gent, if changing			

address of each Officer, Attach additional sheets, Please note the officer/di. P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones leadlike Jones, V as Remove	and/or E if necess rector tite President Chief in Directe In the fo wes the c	Director being added: sary) le by the first letter of the t; T= Treasurer; S= Se Financial Officer. If an or would be PTD. Willowing manner. Curre corporation, Sally Smith	ne office title cretary; D= n officer/dire ently John D is named th	: Director; TR= ! ector holds more oe is listed as the	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
Example: X_Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			Address
1) Change	<u>P</u>	Mar	y lo	per	1445 BROOKS LAWE
Add Remove					OVIEDO FLORIDA 35765
2) Change		-	:		
Add Remove					
Change Add		'			
Remove					
4) Change					
Remove					
5) Change		<u> </u>			
Add Remove					
6) Change	 ,				
Add					

nending or adding additional Articles, enter change(s) he ch additional sheets, if necessary). (Be specific)	
(======================================	
· · · · · · · · · · · · · · · · · · ·	
nn amendment provides for an exchange, reclassification,	or cancellation of issued shares
ovisions for implementing the amendment if not contain	ed in the amendment itself:
(if not applicable, indicate N/A)	
(ij not applicable, indicale N/A)	
(у полирупсионе, тинсине МА)	
(у поларрисане, такие мл.)	
(у поларрисавіє, таксиє МА)	
(у пот аррисавте, такие ТАЛ)	
(у пот аррисавие, такие ТАЛ)	
(у пот аррисавие, таксаме пул)	
(у пол аррисавие, такие N/A)	
(у пот аррисаоне, таксие WA)	
(у пот аррисаоте, таксие ТГА)	
(у пот аррисаоте, таксате тул)	
(у пол аррисавие, таксие ТУА)	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(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 reby the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders throu must be separately provided for each voting group entitled to voting	
"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 was not required.	ithout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	ut shareholder action and shareholder
Dated Sept. 26, 2014	
Signature Mary Look	
	if directors or officers have not been
appointed fiduciary by that fiduciary)	hands of a receiver, trustee, or other court
Mari	
(Typedos ari	Lopez nted name of person signing)
·	
President	dent
(Title	of person signing)