## P02000103145

	(Re	questor's Name)	
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	PICK-UP	☐ WAIT	MAIL
<u>.</u>	(Bu	siness Entity Nan	ne)
		INC. C.A	
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Certified Co	opies	Certificates	s of Status
Special In	structions to	Filing Officer:	
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Amend & N/C

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF C	ORPORATION: YCR MEDICAL	CENTER, INC.	<del></del> ·	
DOCUMENT	NUMBER: 02000103145		<u></u>	
The enclosed	Articles of Amendment and fee ar	e submitted for filing.		
Please return	all correspondence concerning this	s matter to the following:		
	Yoanka Cobas	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> . v</u>	
	(Name o	of Contact Person)		
	YCR MEDICAL CENTER	and the second of the second o	, e e jaroj est	
	(Fin	m/ Company)		
	P.O.BOX 151053	en e		
		(Address)	<del></del>	
	TAMPA, FL 33684			
	(City/ St	ate/ and Zip Code)	· -	
For further in	formation concerning this matter,	please call:		
YOANKA COBAS		at ( 813 ) 376-6718		
	(Name of Contact Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a	check for the following amount:			
□ \$35 Filing Fe	e ☐ \$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 Corporator 409 E. Gaines Street Tallahassee, FL 32	rations et	

DIVISION OF CORPORATIONS

2005 JUN -9

AM 10: 0.3

## Articles of Amendment to Articles of Incorporation of

YCR MEDICAL CENTER, INC
(Name of corporation as currently filed with the Florida Dept. of State)
02000103145
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
COBA'S ENTERPRISES, INC
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)
PLEASE CHANGE THE ADDRESS ALSO TO THE P.O.BOX 151053, TAMPA FL 33684
(Attach additional pages if necessary)
f an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N
N/A

(continued)

The date of each amendment(s) adoption: JUNE 1, 2005
Effective date if applicable: JUNE 1, 2005
(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.
Signed this 25 day of MAY 2005.  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)
YOANKA COBAS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35