P02000112976

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: <u>Daytona C</u>	linic, Inc.	
DOCUMENT NUME	BER:P02000112976		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Penny K. Every		
	<u></u>	Name of Contact Persor	1
	Jeffrey C. Sweet	t, Esquire	
		Firm/ Company	
	595 W. Granada 1	Blvd., Suite A	
		Address	
	Ormond Beach, Fl	L 32174	
		City/ State and Zip Code	· ·
	penny.every@jswe E-mail address: (to be us	eetlaw.com ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Penny K. Ev	very	at (386	de & Daytime Telephone Number
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made [payable to the Florida Depa	rtment of State:
	□S43.75 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment 10 Articles of Incorporation of



Daytona Clinic, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P02000112976 (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 (Florida street address) New Registered Office Address: (Zip Code) (City)

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	VPD_	Luther St. James, M.D.	1890 LPGA Blvd., Suite 260			
Add			Daytona Beach, FL 32117			
X Remove						
2) Change	VPD	James T. Sutton, M.D.	1890 LPGA Blvd., Suite 250			
_X Add			Daytona Beach, FL 32117			
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
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		-		
				
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-				
			<u></u>	
If an amendment provides for an exe provisions for implementing the am	<u>nange, rectassifica</u> endment if not cor	ition, or cancellati itained in the ame	on of issued shares ndment itself:	1
(if not applicable, indicate N/A)				
				
				<u>-</u> .
				 _

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
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 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)	
Stephen A. Sevigny, M.D. (Typed or printed name of person signing)	
President (Title of person signing)	