P03000001963

(Requestor's Name)				
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(Address)				
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(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF C	CORPORATION: Flagler Family Pr	ractice, P.A.	_
DOCUMEÑ'	T NUMBER: P03000001963		
The enclosed	Articles of Amendment and fee are	e submitted for filing.	
Please return	all correspondence concerning this	matter to the following:	
	Faith Coleman		
	(Name of	Contact Person)	
	Flagler Family Practice, P.A.	were a	
	(Firm	n/ Company)	
	P.O. Box 963	· ·	
	(,	Address)	
	Bunnell, Fl 32110		**
	(City/ Sta	te/ and Zip Code)	
För further in	formation concerning this matter, p	lease call:	
Faith Coleman		at (386) 586-0464	
	(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a	check for the following amount:		
Ø \$35 Filing Fe	e	☐ \$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		Street Address Amendment Section Division of Corporation 409 E. Gaines Streen	rations

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

Articles of Amendment to Articles of Incorporation of Flagler Family Practice, P.A. (Name of corporation as currently filed with the Florida Dept. of State)
to to
Articles of Incorporation
of Office of the Control of the Cont
Flagler Family Practice, P.A.
(Name of corporation as currently filed with the Florida Dept. of State)
P03000001963
(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.")
(1) professional corporation must contain the word character, professional association, of the abbreviation 1.A.
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article II- Please note that mailing address has changed to PO Box 963 Bunnell FI 32110
The state of the s
Article VI- Please note that the incorporator's name shall here forth be Faith Coleman
changing from the name originally stated, Faith C Becker.
Article VII- Please note that the officer's name shall here forth be Faith Coleman
changing from the name originally stated, Faith C. Becker.
(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)

The date o	of each amendmen	ıt(s) adoption: <u>06/30/2</u>	2005
Effective d	late if <u>applicable</u> :	06/30/2005	
		(no more than 90 days a	fter amendment file date)
Adoption	of Amendment(s)	(CHECK ON	E)
		• • • • •	y the shareholders. The number of votes cast for as/were sufficient for approval.
		nt must be separately p	y the shareholders through voting groups. The rovided for each voting group entitled to vote
	"The number o		endment(s) was/were sufficient for approval by
			(voting group)
) was/were adopted by ction was not required.	the board of directors without shareholder action
	The amendment(s) shareholder action		the incorporators without shareholder action and
Signed this	30th day of	June	
	sele		r officer - if directors or officers have not been fin the hands of a receiver, trustee, or other court actary)
	Fait	th Coleman	
	 :		ted name of person signing)
	Pre	sident	·
		(Tit)	le of person signing)

FILING FEE: \$35