

P0300071732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Received faxed corrections on
9/18/2018 to replace with the
Profit Articles of Amendment.

Office Use Only



900316858619 ✓

08/17/18--01009--015 **35.00

S TALI EN

SEP 18 2018

FILED
18 SEP 18 AM 5:59
CLERK OF SUPERIOR COURT
ALABAMA

Amend



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 20, 2018

LORI SHUMAKER
MD NOW MEDICAL CENTER, INC.
2007 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 33409

SUBJECT: MD NOW MEDICAL CENTERS, INC.
Ref. Number: P03000071732

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE PROFIT ARTICLES OF AMENDMENT WHICH HAS BEEN PROVIDED AND RESUBMIT. SEE THE PRINTOUT OF OFFICER/DIRECTORS NOW ON FILE WITH OUR OFFICE.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 418A00017206

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MD Now Medical Centers Inc
DOCUMENT NUMBER: PO3000071732

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

Please return all correspondence concerning this matter to the following:

Lori Shumaker
Name of Contact Person
MD Now Medical Centers Inc
Firm/ Company
2007 Palm Beach Lakes Blvd
Address
West Palm Beach FL
City/ State and Zip Code
lshumaker@mdnow.com ✓
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori Shumaker at (561) 420 8541
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

MD Now Medical Centers, INC.

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

P03000071732

(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:

The new 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:

(City)

Florida

(Zip Code)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature of New Registered Agent, if changing

FILED
18 SEP 18 AM 5:59

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change VP Brandon Cohen 2007 Palm Beach Lakes
☒ Add Corp Development & Strategy West Palm Beach FL 33409
☐ Remove
- 2) ☐ Change CMO Jeffrey Collins 2007 Palm Beach Lakes
☒ Add West Palm Beach FL 33409
☐ Remove
- 3) ☐ Change VP/S Steve Moore 2007 Palm Beach Lakes
☒ Add West Palm Beach FL 33409
☐ Remove
- 4) ☐ Change _____ _____ _____
☐ Add _____ _____ _____
☐ Remove
- 5) ☐ Change _____ _____ _____
☐ Add _____ _____ _____
☐ Remove
- 6) ☐ Change _____ _____ _____
☐ Add _____ _____ _____
☐ Remove

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change CD Peter Lamelas 2007 Palm Beach Lakes
☐ Add West Palm Beach FL 33409
☒ Remove
- 2) ☐ Change CD Peter Brockway 225 NE Mizner Blvd
☐ Add Boca Raton FL 33432
☒ Remove
- 3) ☐ Change CD Michael Moran 225 NE Mizner Blvd
☐ Add Boca Raton FL 33432
☒ Remove
- 4) ☐ Change CD Ari Zur 225 NE Mizner Blvd
☐ Add Boca Raton FL 33432
☒ Remove
- 5) ☐ Change S Peter Klein 225 NE Mizner Blvd
☐ Add Boca Raton FL 33432
☒ Remove
- 6) ☐ Change VP Stephanie Lamelas 2007 Palm Beach Lakes
☐ Add West Palm Beach FL 33409
☒ Remove

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

[illegible]

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted 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.

Dated

09/18/2018

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)

R.P. DICKERSON

(Typed or printed name of person signing)

CFO

(Title of person signing)