P03000071732

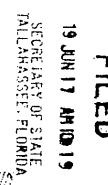
(Requestor's Name)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: MD Now Medical	Centers Inc			
DOCUMENT NUM	P03000071732				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Day Schuler				
		Name of Contact Persor	1		
	MD Now Medical Centers Inc				
		Firm/ Company			
	2007 Palm Beach Lakes Blvd	i			
		Address	<u> </u>		
	West Palm Beach Florida 334089				
		City/ State and Zip Code	2		
dset	nuler@mdnow.com				
	~	sed for future annual report	notification		
	(,		
For further informati	on concerning this matter, pleas	se call:			
Day Schuler		561 at (420-8571		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	■\$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)		
Ar Di P.o	ailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assec, 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 <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amend	iment(s) to
A. If amending name, enter the new name of the corporation:		
NIA	The -	1347C.
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	o," "company," or "incorporated" or the abbrevia. Co". A professional corporation name must contain	tion
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 addresses registered agent and/or the new registered office address:		- - - - - - - -
Name of New Registered Agent		
(Florid stre	vet address)	
New Registered Office Address:	Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		

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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
I) Change	VP	Brandon Cohen	221 Jefferson Ave
Add			Miami Beach Florida 33139
Remove			
2) Change			
Add			——————————————————————————————————————
Remove			
3) Change			ARK SSE
Add			
Remove			STATE 9
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
IN A			
		<u>.</u> .	
	SE		
		<u> </u>	
	AHASS	NUS.	<u> </u>
	33S	7 /	i i
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:			C
(if not applicable, indicate N/A)	DRID		
N A	(\$)		
		_	
			-

The date of each amendment(s) adoption:	N/A	, if other than the
date this document was signed.	·	
Effective date if applicable:		
(no me	ore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State's r		this date will not be listed as the
Adoption of Amendment(s) (CHECK O	NE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approval		lment(s)
☐ The amendment(s) was/were approved by the sharehomust be separately provided for each voting group e		
"The number of votes cast for the amendment(s	s) was/were sufficient for approval	
by		
(voting grou	u ho)	
☐ The amendment(s) was/were adopted by the board of action was not required.	f directors without shareholder action and shar	reholder
■ The amendment(s) was/were adopted by the incorpor action was not required.	rators without shareholder action and sharehol	der
5/29/2019 Dated		
	>	
	other officer – if directors or officers have no r – if in the hands of a receiver, trustee, or oth fiduciary)	
Carte	ray YergenS or printed name of person signing)	
(Typed c	or printed name of person signing)	
VP of I	Real Estate	
	(Title of person signing)	