## P03000088803

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Palm Coast Internal Medicine, PA DOCUMENT NUMBER: P03000088803 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Frank Blanco Name of Contact Person Palm Coast Internal Medicine, PA Firm/ Company 2730 N. State RD 7 Address Margate, Fl. 33069 City/ State and Zip Code fblanco@bluewaterdoctors.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Frank Blanco Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## **Articles of Amendment Articles of Incorporation** of



(Name of Corporation as currently filed with the Flo	rida Dept. of State)				
Palm Coast Internal Medicine, PA					
(Document Number of Corporation (if k	nown)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>FI</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to				
A. If amending name, enter the new name of the corporation:					
	The new				
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 "P.	o". A professional corporation name must contain the				
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)	2730 N. State Rd 7				
	Margate, Fl. 33069				
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the				
Name of New Registered Agent Frank E. Blanco					
2730 N. State Ro	17				
(Florida street address)					
New Registered Office Address: Margate	, Florida 33069				
(City)	(Zip Code)				
New Registered Agent's Signature, if changing Registered Agent.  I hereby accept the appointment as registered agent. I am familial with signature of New Registered Agent.					

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.

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)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	Philip Goodwin	PO BOX 989
Add			Flagler, Bch, Fl. 32136
Remove			
2) Change	Р	Roy Hinman	100 Arricola Avenue
<b>✓</b> Add			St. Augustine, Fl. 32086
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	. (Be specific)	
		•
If an amendment provides for an ex-	change, reclassification, or cancellation of issued sha	res.
provisions for implementing the an	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res.
If an amendment provides for an exprovisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res.
provisions for implementing the an	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res,
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provisions for implementing the an	change, reclassification, or cancellation of issued sha lendment if not contained in the amendment itself:	res,
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provisions for implementing the an	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res,

The date of each amendment(s) adoption: 04/01/2014	, if other than the
date this document was signed.	
Effective date if applicable: 04/01/2014	
(no more than 90 days after amendment file date)	
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 04/01/2014	
Signature Thus	
(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)	
Roy Hinman MD	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	