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SECRETARY OF STATE
ALLAHASSEE, FI DRIE,

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	DELILAH A	ALONSO, M.D.,	P.A.	
DOCUMENT NUI	MBER:	P03000096	5288		
The enclosed Articl	es of Amendme	nt and fee are	submitted for filin	ıg.	
Please return all cor	respondence co	ncerning this n	natter to the follow	ving:	
	Mary	Lou Rodon,	. Esq.	-	
,		(Name of C	Contact Person)		
	Mary	Lou Rodon,	P.A.		
		(Firm/	Company)	,	
	2222 Pon	ce de Leon	Blvd., PH		
		(A	ddress)		
·	Coral	Gables, Fl	lorida 33134		
		(City/ State	and Zip Code)		
For further information	tion concerning	this matter, plo	ease call:		
Mary Lou Rodon			at (305	445-8881	<u>.</u>
(Name of Contact Person)			(Area Code	& Daytime To	elephone Number)
Enclosed is a check	for the following	g amount:			
\$35 Filing Fee	\$43.75 Filing Certificate o		\$43.75 Filing F Certified Copy (Additional copenclosed)		□ \$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 Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	ction porations g Center Circ	le

Articles of Amendment to Articles of Incorporation of

DELILAH ALONSO, M.D., P.A.

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

7 NOV 13 AM 9: 43
ECRETARY DF STATE
LLAHASSEE FLORIDA

P03000096288

(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.")

<u>AMENDMENTS ADOPTED</u>- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (<u>BE SPECIFIC</u>)

The Principal Address shall be changed as follows:

New Address
2222 Ponce de Leon Blvd,, PH Coral Gables, Florida 33134
ged as follows:
New Address
2222 Ponce de Leon Blvd., PH Coral Gables, Florida 33134
dditional pages if necessary)

(continued)

for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption: November 6, 2007
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were approved 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.
Signature X Della Cel.
(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)
Delilah Alonso
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35