

P040000003273

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10/14/05 10:10:44 \*435.00

*Amended*

FILED  
05 OCT 14 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*00789, 00524, 00671

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SUNSHINE AMBULATORY CARE CENTER, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P04000003273

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LORETHA KING, DO  
(Name of Contact Person)

SUNSHINE AMBULATORY CARE CENTER, INC.  
(Firm/Company)

1405 SE GOLDTREE DRIVE, SUITE #C  
(Address)

PORT ST LUCIE, FL 34952  
(City/State and Zip Code)

For further information concerning this matter, please call:

LORETHA KING, DO at (772) 380-0900  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**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

SUNSHINE AMBULATORY CARE

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

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TALLAHASSEE, FLORIDA

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(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.")

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

ARTICLE II: PRINCIPAL PLACE OF BUSINESS ADDRESS:

1405 SE GOLD TREE DRIVE SUITE #C

PORT ST LUCIE, FL 34952

MAILING ADDRESS:

1405 SE GOLD TREE DRIVE, SUITE #C

PORT ST. LUCIE, FL 34952

ARTICLE V LORETHA KING, DO

Address 1405 SE GOLD TREE DRIVE, SUITE #C

PORT ST LUCIE, FL 34952

(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 of each amendment(s) adoption: 05/05/05

Effective date if applicable: 05/05/05  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ 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

Loetha King, DO  
(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)

LOETHA KING, DO  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

FILING FEE: \$35