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(Re	equestor's Name)	
(Ac	ldress)	
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(Cii	ty/State/Zip/Phone	:#)
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MARSH

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Deborah C. Rose D.C., P.A.
DOCUMENT NUMBER: PO 40000295165
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ludwig J. Abruzzo (Name of Person)
Ludwig J. Abruzzo, P. A. (Name of Firm/ Company)
5425 Parh Central Court (Address)
Maples, Fl 34109 (City/ State/ and Zip Code)
For further information concerning this matter, please call:
Ludwig J. Abrizzo a1(239) 593-1444

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

TO: Amendment Section

\$43.75 Filing Fee & Certificate of Status

(Name of Person)

☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

(Area Code & Daytime Telephone Number)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Articles of Amendment

to

Articles of Incorporation of

Name of corporation as currently filed with the Florida Dept. of State)
PO 4000029505 (Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing): Deboroh C. Rose D.C. P.A. (must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
<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>)
OU FEB 20 AM 10: 2. SECRETIAN OF STATI ALLAMASSEE, FLORII
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(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: February 17, 2004
Effective date if applicable: Femilian 17 3001 (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.
Signed this 17th day of February, 2004.
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)
Deborah C. Rose (Typed or printed name of person signing)
President. (Title of person signing)

FILING FEE: \$35