

P04000161849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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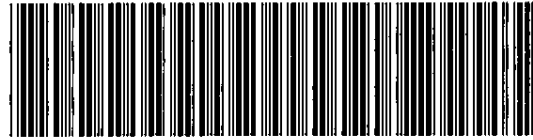


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TALLAHASSEE, FLORIDA

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*Amend
Tewis
1-3-12*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Glenn Chapman, MD Inc

DOCUMENT NUMBER: P04000161849

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharon Chapman

Name of Contact Person

Glenn Chapman, MD Inc

Firm/ Company

5001 Old Ocean Blvd #3

Address

Ocean Ridge FL 33435

City/ State and Zip Code

gschapman@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Halpern

Name of Contact Person

at (561)

Area Code & Daytime Telephone Number

7563004

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

enclosed)

☐ \$43.75 Filing Fee &
Certified Copy

(Additional copy is
(Additional Copy

☒ \$52.50 Filing Fee &
Certificate of Status

Certified Copy

is enclosed)

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

Glenn Chapman, MD, Inc.

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

P04000161849

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Sharon P. Chapman

5001 Old Ocean Blvd., Suite #3

(Florida street address)

New Registered Office Address:

Ocean Ridge

(City)

Florida 33435

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary) (Be specific)

This is to remove Glenn S. Chapman as the ^{vice} president of Glenn Chapman M.D. Inc.
who is deceased as of October 25, 2011.

**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:**
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: December 15, 2011

Effective date if applicable: December 15, 2011
(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 12/15/2011

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)

Sharon Chapman

(Typed or printed name of person signing)

Trustee

(Title of person signing)