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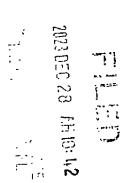
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| Special Instructions to Filing Officer: |
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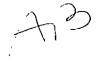




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12/28/23--01005--013 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Central Florida Pro | emier Eye Associates, P.A. | | |
|--|---|--|--|--|
| DOCUMENT NUM | P05000019160 | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corre | spondence concerning this ma | atter to the following: | | |
| | Stephanie Papoulis | | | |
| | | Name of Contact Person | 1 | |
| | US Eye, LLC | | | |
| | | Firm/ Company | | |
| | 8043 Cooper Creek Blvd, Su | • • | | |
| | | Address | | |
| | University Park, FL 34201 | | | |
| | | City/ State and Zip Cod | e | |
| | stephanie.papoulis@useye.co | om | | |
| | · · · · · · · · · · · · · · · · · · · | sed for future annual report | notification) | |
| For further information | on concerning this matter, plea | co call | | |
| To further intormatio | or concerning this matter, prea | se can. | | |
| Stephanie Papoulis | | at (| 373-6277 | |
| Name | of Contact Person | Area Code & Daytime Telephone Number | | |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | artment of State: | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$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 Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

| Central Florida Premier Eye Associates, | P.A. | 202 | 3 DEC 23 | 8_ AH IO: L2 |
|--|------------------------------|---------------------------------|-------------|---------------------------|
| (Name o | of Corporation as current | | | |
| P05000019160 | | U | | 12 for e |
| | (Document Number o | f Corporation (if known) | · · · · | · I L |
| Pursuant to the provisions of section 607. ts Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporati | on adopts t | he following amendment(s) |
| L. If amending name, enter the new na | ame of the corporation: | | | |
| | | | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association," | Corp." "Inc." or "Co". ? | 4 professional corporati | | |
| 3. Enter new principal office address, Principal office address <u>MUST BE A S</u> | | | | |
| C. Enter new mailing address, if appli (Mailing address MAY BE A POST) | icable: OFFICE BOX) | 8043 Cooper Creek E | llvd | |
| | | Suite 101 University Park. FL 3 | 4201 | |
| If amending the registered agent an new registered agent and/or the new | | | name of | the |
| CFS Management 11 C | | _ | | |
| Name of New Registered Agent | Ci o management, isise | | | |
| Name of New Registered Agent | | Suite 101 | | |
| Name of New Registered Agent | 8043 Cooper Creek Blvd, | Suite 101 | | |
| Name of New Registered Agent New Registered Office Address: | 8043 Cooper Creek Blvd, | | , Flori | da 34201 |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

| Example: XChange | PT | 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 | <u>P</u> | Kinga Huse | 1360 E. Venice Ave |
| Add | | | Venice, FL34285 |
| X Remove | | | |
| 2) Change | CEO | Brad Logan | 8043 Cooper Creek Blvd |
| X Add | | - | University Park, FL 34201 |
| Remove Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | ending or adding th <i>additional shee</i> | ts, if necessary). | (Be specific) | | | | |
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| <u>fan</u> | amendment pro | vides for an excl | <u>iange, reclassific</u> | ation, or cancel | lation of issued s | hares, | |
| prov | visions for imple: (if not applicable, | indicate M/A) | nament it not co | ontained in the a | mendment itsell | <u>:</u> | |
| | у пол арупсате, | , marcale 1971) | | | | | |
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| | adoption: | , if other than the |
|--|---|-------------------------------------|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | (no more than 90 days after amenament fite date) | |
| Note: If the date inserted in this document's effective date on the | block does not meet the applicable statutory filing requirements. Department of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors without sharehold | er action and shareholder |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amend sufficient for approval. | iment(s) |
| | pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s | |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval | |
| by | ." | |
| | (voting group) | |
| 12/12/20 Dated | 23 | |
| Dated | | |
| Signature | 4/ | |
| | dilector, president or other officer - if directors or officers have not | |
| | ted, by an incorporator – if in the hands of a receiver, trustee, or oth- inted fiduciary by that fiduciary) | er court |
| appo | | |
| | Kinga Huse | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |