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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Gulf Coast Optometry, P.A. DOCUMENT NUMBER: P05000094274 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bryan Rotella, Esq. Name of Contact Person Ansa Assuncao, LLP Firm/ Company 100 S. Ashley Drive, Suite 1740 Address Tampa, FL 33602 City/ State and Zip Code drbrooks@gcoeyes.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bryan Rotella Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

•	Articles of Am	endment	grafia. Garaga Baraga
	Articles of Inco	rporation	A
GULF COAST OPTOME	<del></del>		
(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	
P05000094274			
(Documer	nt Number of Corporation (if I	known)	်္သုံ့ မှ
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new na	ime of the corporation:		
n/a			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corporation name	the abbreviation
B. Enter new principal office address,	if applicable:	5237 Summerlin Commons	Blvd.
(Principal office address MUST BE A S		Suite 333	
		Fort Myers, FL 33907	
(Mauing address MAY BE A POST OFFICE BOX)		5237 Summerlin Commons	Blvd.
		Suite 333	
		Fort Myers, FL 33907	
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the	
Name of New Registered Agent	n/a		
	(Florida stree	address)	
New Registered Office Address:	n/a , Florida		
New Registered Office Address.	(City)	Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	gned agent. I am familiar wi		sition.
Sig	gnature of New Registered Ag	gent, if changing	

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:  $\eta/\alpha$  (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 <math>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: X Change	<u>PT</u>	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>		<u>Addres</u> s
1) Change Add Remove		<del>-</del>		
2) Change Add Remove			<u>_</u>	
3 ) Change Add Remove	<u> </u>			
4) Change Add Remove				
5) Change Add Remove	<del></del>			
6) Change Add Remove			·····	

If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
ı/a	,
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
74	
<del></del>	

The date of each amendment(s) adoption: May 30, 2012	
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were sa	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement reach 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)
	(voing group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ade action was not required.	opted by the incorporators without shareholder action and shareholder
<sub>Dated</sub> May 3	0, 2012
C) — a commo	The state of the s
Signature	director, president or other officer - if directors or officers have not been
	ed, by an incorporator — if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
	Kevin G. Brooks
•	(Typed or printed name of person signing)
	DPST
	(Title of person signing)