## P05000095249

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<del></del>
	_
Special Instructions to Filing Officer:	

Office Use Only



800068976748

03/31/06-01015-012 \*\*35.00

O6 MAR 31 PM 1: 08
SLCRETARY OF STATE

Count 3320 &

## **COVER LETTER**

**TO:** Amendment Section · Division of Corporations

NAME OF CORPORATION: Psychiatric	c Consulting Network, Inc.
DOCUMENT NUMBER: P050000	95249
The enclosed Articles of Amendment and fee are submi	tted for filing.
Please return all correspondence concerning this matter	to the following:
Douglas Gignac (Name of Contact	
(Name of Contact	Person)
Psychiatric Consulting N (Firm/Compa	letwork, Inc.
10406 S.W. 186 Terrac (Address)	C&
Miami, FL 33157 (City/State and Zi	ip Code)
For further information concerning this matter, please ca	
Douglas Gignac at (	(954) 415 - 6940 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
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)
Amendment Section Am Division of Corporations Div P.O. Box 6327 Clif Tallahassee, FL 32314 266	eet Address endment Section rision of Corporations fton Building 1 Executive Center Circle

## **Articles of Amendment** to **Articles of Incorporation**

of
Psychiatric Consulting Network, Inc. 28 8  (Name of corporation as currently filed with the Florida Dept. of State)
(Name of corporation as currently filed with the Florida Dept. of State)
P0500095249
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:
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 5 - Directors
Effective 4/1/06, Board of Director is amended
Article 5 - Directors  Effective 4/1/06, Board of Director is amended  as follows: (Added)
Armando Gonzalez - President
10406 S.W. 186 Terrace
Migmi, FL 33157
(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:
Effective date if applicable: 3/1/06  (no more than 90 days after amendment file date)
(no more than 90 days after amendment the 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  (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)  Douglas Gianac  (Typed or printed name of person signing)
(1 yped or printed name of person signing)
Treasurer

FILING FEE: \$35

(Title of person signing)