P05000105782

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

MAR 1 6 2010

COVER LETTER

- TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: JOSEPH 5. Santini, P.A.				
DOCUMENT NUMBER: <u>05000 105782</u>				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Soeph Santini Name of Contact Person				
Soleph J. Santini, P.A.				
359 S. Cantry Club Blue Address				
City/ State and Zip Code City/ State and Zip Code City/ State and Zip Code E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (561) 400 855 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certificate of Status \$\b				
Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building Well-borrow FL 20214 2000 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301



March 4, 2010

JOSEPH SANTINI JOSEPH J SANTINI, P.A. 359 S COUNTRY CLUB BLVD BOCA RATON, FL 33487

SUBJECT: JOSEPH J. SANTINI, P.A.

Ref. Number: P05000105782

We have received your document for JOSEPH J. SANTINI, P.A. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 610A00005371

Teresa Brown Regulatory Specialist II

Articles of Amendment

	to .	
,	Articles of Incorporatio	n 20/0 //
	of	Man A
7000	Cantin	DA GERALIE
(Name of Corporation as curi	rently filed with the Florid	a Dept. of State)
	<i>0</i> >	a Dept. of State)
<u> </u>	カナ mber of Corporation (if kno	~~~~~
(Document Nu	inder of Corporation (if kno	wii)
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Fi	lorida Profit Corporation adopts the following
A. If amending name, enter the new name	of the corporation:	
		_
7 7 4 1 7 17 17	4	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	e designation "Corp," "Inc	e," or "Co". A professional corporation
B. Enter new principal office address, if ap	nlicable:	
(Principal office address <u>MUST BE A STRE</u>		
		
	 	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF.		
(muning anaress MAT BE A FOST OFF)	<u> </u>	
	<u> </u>	
D. If amending the registered agent and/or	registered office address is	n Florida, enter the name of the
new registered agent and/or the new reg		
Name of New Registered Agent:		
wame of New Registered Agent.		
New Registered Office Address:	(Florida street a	address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if chang	ing Registered Agent.	
New Registered Agent's Signature, it chang I hereby accept the appointment as registered	agent. I am familiar with a	and accept the obligations of the position.
_	Signature of New Registered	d Agent if changing
	menmane of them vermieter	A ZIECIN, IJ CHUNGING

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)

Title	Michele Santini	Address 359 S. Cantry Chb Blue	Type of Action Add Remove
		33487	Add Remove
E. <u>If amendir</u> (attach addi	ng or adding additional Articles, enter of tional sheets, if necessary). (Be specificational sheets)	change(s) here:	
provision	ndment provides for an exchange, reclassion implementing the amendment if a applicable, indicate N/A)	assification, or cancellation of issued to contained in the amendment in t	ied shares, self:

The date of each amendment(s) adoption: (date of adoption is required) Effective date if applicable: (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 stateme 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 director, president or other officer – if directors or officers have not been spected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing) (Title of person signing)