

P05000133858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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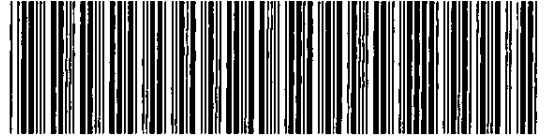
(Business Entity Name)

(Document Number)

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Amend

12/04/07--01043--010 **35.00

FILED
2007 DEC 14 PM 4:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*00789 00563 02673 00521 00171

*Done
12/14/07*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CORAL MEDICAL MANAGEMENT, INC
(Name of Corporation)

DOCUMENT NUMBER: P05000133858

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ADELFIN ADAY (PRESIDENT)
(Name of Contact Person)

CORAL MEDICAL MANAGEMENT, INC
(Firm/Company)

2200 SW 16 STREET # 224
(Address)

MIAMI - FLORIDA 33145
(City/State and Zip Code)

For further information concerning this matter, please call:

ADELFIN ADAY at (561) 523-0710
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 6, 2007

Adelfin Aday
Coral Medical Management, Inc.
2200 SW 16 Street #224
Miami, FL 33145

SUBJECT: CORAL MEDICAL MANAGEMENT, INC.
Ref. Number: P05000133858

We have received your document for CORAL MEDICAL MANAGEMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

The amendment must be adopted in one of the following manners:

(1) If an amendment was approved by the shareholders, one of the following statements must be contained in the document.

(a) A statement that the number of votes cast for the amendment by the shareholders was sufficient for approval, -or-

(b) If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

(2) If an amendment was adopted by the incorporators or board of directors without shareholder action.

(a) A statement that the amendment was adopted by either the incorporators or board of directors and that shareholder action was not required.

This document is missing the second page. I have enclosed another amendment form that you may fill out and return to us.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 807A00068926

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CORAL MEDICAL MANAGEMENT INC.

DOCUMENT NUMBER: P05000133858

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

Please return all correspondence concerning this matter to the following:

RECEIVED
2007 DEC 14 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADELFIN ADAY
(Name of Contact Person)

CORAL MEDICAL MGT. INC.
(Firm/ Company)

2200 SW 16 STREET #224
(Address)

MIAMI - FL. 33145
(City/ State and Zip Code)

For further information concerning this matter, please call:

ADELFIN ADAY at (561) 523-0710
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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)

* PS. THIS IS A RESEND FOR MISSING DOCUMENT
ALREADY PAID FEE ON FIRST MAILING

THANKS

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

RECEIVED
2007 DEC 14 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

2007 DEC 14 PM 4:59

CORAL MEDICAL MANAGEMENT SECRETARY OF STATE
TALLAHASSEE, FLORIDA
(Name of corporation as currently filed with the Florida Dept. of State)

P05000133858

(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:

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 VII OF THE ABOVE CORPORATION TO BE PARTIALLY AMENDMENT

- PLEASE DELETE OFFICER (VICE-PRESIDENT)

NAME: ERNESTO GARCIA

This Amendment APPROVED BY THE COMPANY PRESIDENT
DATED 11/28/2007, IN ACCORDANCE W/ ARTICLE 607, FLORIDA
STATUTES.

Adelelin Adley

ADELELIN ADLEY (PRESIDENT)

(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)

N/A.

The date of each amendment(s) adoption: 11/28/2007

Effective date if applicable: _____
(no more than 90 days after amendment file 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

Adel Fin Aday

(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)

ADELFIN ADAY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35