P05000/52672

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T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: LOU SANSEVERO, P.A. DOCUMENT NUMBER: POSODO 152672
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person LOU SANSE VEND, P.A. Firm/ Company 3013 WILD ENNESS BLUD W Address Address City/ State and Zip Code LOU @ LOU SANSE VERD. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (941) 447-0032 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2012

LOU SANSEVERO LOU SANSEVERO, P.A. 3013 WILDERNESS BLVD. WEST PARRISH, FL 34219

SUBJECT: LOU SANSEVERO, P.A.

Ref. Number: P05000152672

We have received your document for LOU SANSEVERO, P.A. and check(s) totaling \$30.00. However, your check(s) and document are being returned for the following:

The current name of the entity is as referenced above. Please correct your document accordingly.

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 \$ is due.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

9:55

Letter Number: 612A00010687

Articles of Amendment to

Articl	cles of Incorporation	
Low	SANSEVERO, PA.	
(Name of Corporation as currently filed w	vith the Florida Dept. of State)	
P050	00152672	
(Document Number of Corpo	· · · · · · · · · · · · · · · · · · ·	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amo	endment(s) to
A. If amending name, enter the new name of the corpora	ration:	
LOUIS SANSE	VERO, P.A. The	new
name must be distinguishable and contain the word "co	orporation," "company," or "incorporated" or the abbrev nc," or "Co". A professional corporation name must conta	iation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	S) PA	.
•		2 NPR
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	12 PH 2:
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		TATE ORIDA
Name of New Registered Agent	NIA.	
	Florida street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	ed Agent: familiar with and accept the obligations of the position.	

Page 1 of 4

Signature of New Registered Agent, 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:

(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: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones	,		
X Add	<u>sv</u>	Sally Smith	N/A		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change Add Remove		-			
2) Change Add Remove					
3) Change Add Remove					
4) Change Add Remove					
5) Change Add Remove					
6) Change Add Remove					

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ge, reclassification nent if not contain	, or cancellatio	n of issued sha dment itself:	res,
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	ge, reclassification nent if not contain	ge, reclassification, or cancellation nent if not contained in the amendal of the	ge, reclassification, or cancellation of issued shanent if not contained in the amendment itself:

The date of each amendment(s) adoption	on: 4-7-2012
Effective date if applicable:	M 4-7-2012
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.
☐ The amendment(s) was/were approved must be separately provided for each	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder
Dated	-7.12
selected, by a	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
4	(Typed or printed name of person signing)
P	RESIDENT/CED