P05000158905

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COVER LETTER

3.

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Sandy M. Fink, DV	/M, P.A.			
DOCUMENT NUMB	P05000158005				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	condence concerning this mat	ter to the following:			
:	Jon Squires, Esquire				
-	Name of Contact Person				
(Gray / Robinson				
-		Firm/ Company			
:	301 E. Pinc Street, Suite 1400	• •			
-	Address				
	Orlando, FL 32801				
-		City/ State and Zip Code			
sweeth	oetty30@aol.com				
		sed for future annual report	notification)		
For further information Jon Squires	concerning this matter, pleas	se call:at (407	843-8880		
	f Contact Person		de & Daytime Telephone Number		
	the following amount made		•		
■ \$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)		
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		



Articles of Amendment to Articles of Incorporation of

Sandy M. Fink, DVM, P.A. (Name of Corporation as currently filed with the Florida Dept. of State) P05000158905 (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: A. If amending name, enter the new name of the corporation: W.O.V.H., P.A. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Jon Squires, Esquire Name of New Registered Agent Gray / Robinson 301 East Pine Street, Suite 1400 (Florida street address) Orlando Florida New Registered Office Address: (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	VSD	Sandy Fink, MDVM	1350 South Vineland Road	
Add xRemove			Winter Garden, FL 34787	
2) Change	VSD	Melissa Nadler	1350 South Vineland Road	
x Add			Winter Garden, FL 34787	
Remove				
3)Change				
Add				
Remove				
4)Change				
Add				
Remove			1	
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
	·
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date	?)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	•
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"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 action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	pholder
Signature (By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Attorney in fact (Title of person signing)	
the of person signing)	