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From:

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Account Number : I2000000195 Phone : (850)521-1000

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COR AMND/RESTATE/CORRECT OR O/D RESIGN TREASURE COAST RADIATION ONCOLOGY, P.A.

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Help

	Articles of A	mendment		
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•	Articles of Inc	orporation		色三
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TREASURE COAST	RADIATION C	NCOLOGY, P.A		many many products to the second
(Name of Corporation as cur	rently filed with	the Florida Dept. of	State)	
PO	06000034390		ŗ	iga 😦 🚺
	mber of Corporat	ion (if known)		PH IZ:
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statu	tes, this <i>Florida Prof</i>	It Corporation add	
A. If amending name, enter the new name of	of the corporatio	<u>n:</u>		
				PP-72
name must be distinguishable and contain	abs annual "same		** (tt	The new
abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro B. <u>Enter new principal office address, if ap</u> (Principal office address <u>MUST BE A STREI</u>	ofessional associa olicable:	ation," or the abbrevi	BLVD	-
		STUART FL 3499	<u> </u>	
		···		_
C: Enter new mailing address, if applicable	,•			
(Mailing address MAY BE A POST OFF)		3343 STATE RD 7	7	_
		WELLINGTON F	T 22440	
		WELLINGTON F.	<u>L 22449</u>	<del>-</del> -
N 16 3! 4b 1 1 1/		- 1.1		Do .
D. If amending the registered agent and/or new registered agent and/or the new registered.			<u>nter the name of t</u>	<u>ne</u>
Name of New Registered Agent:	RAJIV PATEI	<u></u>	<del></del>	
	3343 STATE F			
New Registered Office Address:	(Florid	da street address)		
	WELLINGTO	N	, Florida <u>33449</u>	)
	(City)	(2	Zip Code)	
N D	ua Doaletoued A.			
New Registered Agent's Signature, if changi Thereby accept the appaintment as registered a			e obligations of the	position.
	KUND			•
9	ionature of New	Registered Agent if ch	amoino	

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	<u>Name</u>	Address	Type of Action
Director	SCOTT A GASIOREK	67 NORTH RIVER RD	. □ Add
Dimental and		STUART FL 34996	Remove
Director and President	KISHORE DASS	3343 STATE RD 7	. ₩ Add
Director and		WELLINGTON FL 33449	Remove
Vice President	BEN HAN	3343 STATE RD 7	Add Remove
		WELLINGTON FL 33449	
provisions	dment provides for an exchange, reclifor implementing the amendment if napplicable, indicate N/A)		
<del> </del>			
···			
		- WN8UTERSON (MILE)	<u> </u>

## TREASURE COAST RADIATION ONCOLOGY, P.A

Amending Officers/Directors continued

Title

Name

Address

Type of Action

Secretary and Treasurer RAJIV PATEL

3343 STATE RD 7 WELLINGTON FL 33449 X Add

• • 1 <b>\$@W</b> 13:57 561	76/36762011 3:18:04 PM HE PASE ORE 4/1905 Fax Server PAGE
The date of each amendmen	it(s) adoption: June 13, 2011
Effective date if applicable:	June 13, 2011 (date of adoption is required)
i	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	are approved by the shareholders through voting groups. The following statement and 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated June	10, 2011
Signature	
, mar.	4
şel e	a director, president or other officer — if directors or officers have not been cted, by an incorporator — if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
şel e	cted, by an incorporator - if in the hands of a receiver, trustee, or other court

President

(Title of person signing)