

PD6000039099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

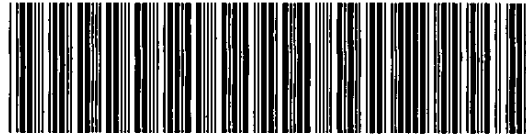
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend  
Syl*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: STEVEN GORIN D.O., P.A.

DOCUMENT NUMBER: \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following: <sup>after August 1, 2006</sup>

Steven Gorin D.O.

(Name of Contact Person)

Steven Gorm D.O., P.A.

20295 NE 29<sup>th</sup> Place

(Firm/ Company)

Suite 300

(Address)

Aventura, FL 33180

(City/ State and Zip Code)

For further information concerning this matter, please call:

Steven Gorin

(Name of Contact Person)

at ( 816 ) 820-6386

(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)

**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

June 26, 2006

Florida Department of State  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

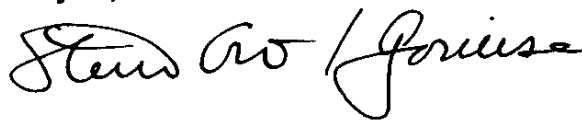
To Whom It May Concern:

I am currently filing from my home in Philadelphia. I will be moving to Florida next month, but I need a copy of the paperwork sent to my home address to be able to expedite my application process for Medicare. Please send it to:

Steven Gorin D.O.  
1600 Arch St. #1705  
Philadelphia, PA 19103

My other contact information is:  
Home phone (267) 514-9677  
Cell Phone (816) 820-6386  
e-mail: [stevengorin@hotmail.com](mailto:stevengorin@hotmail.com)

Thank you,

A handwritten signature in black ink, appearing to read "Steven Gorin". The signature is fluid and cursive, with the first and last names being the most prominent parts.

Steven Gorin D.O.

Articles of Amendment  
to  
Articles of Incorporation  
of

Steven Gorin D.O., P.A.  
(Name of corporation as currently filed with the Florida Dept. of State)

P06006039099

(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)**

I need to change my address to:

20295 NE 29<sup>th</sup> Place

Turnberry Bank Building

Suite 300

Aventura, FL 33180

(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)

(continued)

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TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 6/26/06

Effective date if applicable: 6/27/06  
(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

Steven Gorin

(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)

Steven Gorin D.O.

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**