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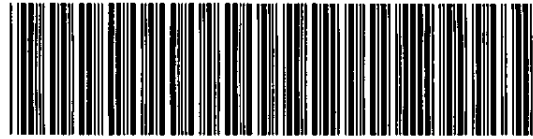
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C. LEWIS  
JUL 25 2014  
EXAMINER

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Gulf Coast Dermatology, PA

DOCUMENT NUMBER: P06000064859

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

Please return all correspondence concerning this matter to the following:

Scott B. Barloga, ESQ

Name of Contact Person

Pope & Barloga, PA

Firm/ Company

736 Jenks Aveune

Address

Panama City, Florida 32401

City/ State and Zip Code

jonward16@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tina Prater

at ( 850 ) 784-9174

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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

*Amended And Restated*

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**AMENDMENT and RESTATEMENT OF  
ARTICLES OF INCORPORATION  
OF  
GULF COAST DERMATOLOGY, PA**

Document Number: P06000064859

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The undersigned officer of the corporation described herein hereby submits the following amendment and restatement of the corporation's Articles of Incorporation pursuant to the provisions of Florida Statute § 607.1007. The name of the Corporation is to be changed to SOUTHEASTERN DERMATOLOGY GROUP, P.A.:

ARTICLE 1 - NAME

The name of this corporation is SOUTHEASTERN DERMATOLOGY GROUP, P.A.

ARTICLE 2 - STREET ADDRESS AND MAILING ADDRESS

The principal place of business of the corporation in the State of Florida is 2505 Harrison Avenue, Panama City, FL 32405 and the mailing address is 2505 Harrison Avenue, Panama City, FL 32405.

ARTICLE 3 - DURATION

This professional association shall exist perpetually.

ARTICLE 4 - PURPOSE

This corporation is organized for the following purposes:

- a. To engage in the practice of medicine as a professional corporation and to own and operate a medical clinic for the purposes of providing medical care and treatment.
- b. To do everything necessary, proper, or convenient to accomplish any of the purposes set forth in these articles, and to do every other act incidental to the corporate purposes which is not forbidden by Florida laws or by the provisions of these articles of incorporation.

The purposes of this corporation shall be carried out only through officers, employees, and agents, each of whom is licensed or otherwise legally qualified to render professional medical services in the State of Florida.

#### ARTICLE 5 - STOCK

This corporation is authorized to issue one hundred thousand (100,000) shares of Common Stock of the par value of \$1 per share, all of one class.

#### ARTICLE 6 - REGISTERED AGENT AND ADDRESS

The name and street address of the registered agent of this Corporation is Jon R. Ward, 2505 Harrison Avenue, Panama City, FL 32405.

#### ARTICLE 7 - INCORPORATOR

The name of the person signing the original Articles of Incorporation was Jon R. Ward.

#### ARTICLE 8 - STOCK TRANSFER RESTRICTIONS

Except as otherwise provided in the Bylaws or in a separate agreement among the shareholders, no shareholders may sell, assign, pledge, or otherwise transfer any of the Corporation's shares of stock or any right or interest in them, whether voluntarily, by operation of law, by gift, or otherwise.

The amendment and restatement of the corporation's Articles of Incorporation was approved and adopted by the shareholders of the corporation at a meeting held for that purpose on July 7, 2014. The shareholders voted unanimously in favor of the adoption of the amendment which was sufficient for approval.

IN WITNESS WHEREOF, the undersigned has executed this amendment and restatement of the corporation's Articles of Incorporation this 7<sup>th</sup> of July, 2014.

GULF COAST DERMATOLOGY, P.A.

By: Jon R. Ward  
Its: President

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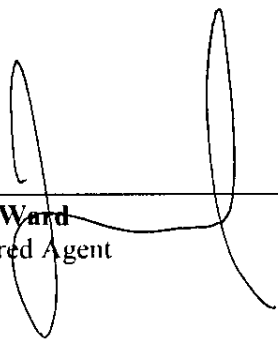
### ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

Jon R. Ward, having been named as registered agent to accept service of process for **GULF COAST DERMATOLOGY, PA**, at the registered office designated below, hereby agrees and consents to act in that capacity.

Registered Office: 2505 Harrison Avenue, Panama City, FL 32405.

The undersigned is familiar with and accepts the duties and obligations of the position of registered agent as provided for in the Florida Statutes.

DATED this 7<sup>th</sup> day of July, 2014.

  
\_\_\_\_\_  
**Jon R. Ward**  
Registered Agent

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