## P06000087166

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
DEC 2 1 2021
<u> </u>

Office Use Only



700377359857

12/96/21--01027--098 \*\*35.00

2021 DEC -6 AH 4: 42 SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: MIKE CHOI, D.O., P.A.					
DOCUMENT NUMBER:	UMENT NUMBER:P06000087166				
The enclosed Articles of Amer	adment and fee are su	bmitted for filing.			
Please return all corresponden	ce concerning this ma	tter to the following:			
		DR. MIKE CHOI			
<del></del>	Name of Contact Person				
	MIKE CHOI, D.O., P.A.				
	Firm/ Company				
	4390 NORTH FEDERAL HIGHWAY, STE 206				
	Address				
	FT. LAUDERDALE, FL 33308				
	City/ State and Zip Code				
		mchoi1270@yahoo.com			
——————————————————————————————————————	nail address: (to be us	sed for future annual report	notification)		
For further information concer DR. MIKE CI		se call:at (718	809-4423		
Name of Contact Person		ar (Area Co	de & Daytime Telephone Number		
Enclosed is a check for the fol	lowing amount made	payable to the Florida Depa	artment of State:		
<u> </u>	\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## **Articles of Amendment Articles of Incorporation** of

FILED

MIKE CHOI, D.O., P.A.

		·	2021 DEL -6 AM 4:42	
( <u>N</u> ame	of Corporation as curren	tly filed with the Florid	la Dept. of State)	
	P060000	87166	SECRETARY OF STAIT	
<del></del>	(Document Number	of Corporation (if know	<del></del>	
rsuant to the provisions of section 607 Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corpord	ation adopts the following amendment(s	
If amending name, enter the new n	ame of the corporation:			
			The new	
me must be distinguishable and contain nc.," or Co.," or the designation "C hartered," "professional association,	Corp," "Inc," or "Co".	A professional corpora	rated" or the abbreviation "Corp.,"	
Enter new principal office address,	if applicable:	4390 NORTH FEDERAL HIGHWAY		
rincipal office address MUST BE A S		STE 206		
		FT. LAUDERDAL	.E, FL 33308	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4390 NORTH FEDERAL HIGHWAY		
		STE 206		
		FT. LAUDERDALE, FL 33308		
If amending the registered agent at new registered agent and/or the ne			the name of the	
Name of New Registered Agent				
	4390 NORTH FEDERAL	L HIGHWAY, STE 206		
	(Florida s	treet address)		
	DEC. L. ATHNESS IN A L. D.		, Florida 33308	
New Registered Office Address:	FT. LAUDERDALE		, FROTIQA	

Signature of New Registered Agent, if changing

## Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SY</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	DO	міке сноі	4390 NORTH FEDERAL HWY
Add			STE 206
Remove			HOLLYWOOD, FL 33308
2) Change	·		
Add			
Remove Change	<del></del>		
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			<del> </del>
6) Change			
Add			
Remove			

t amending or adding Attach <i>additional sheets</i>	auditional Artic	eles, enter change(s)	iere:		
xuavn aaanionai Sneets	s, y necessary).	(Be specific)			
	•	<del></del>			
			· · · · · · · · · · · · · · · · · · ·		
	· · · · ·				
		<u> </u>			
	·			<del></del>	
	<u>.</u>				
				<del></del>	
	·	<u> </u>			
	-			<del> </del>	
		·			
f an amendment prov	ides for an exchi	ange, reclassification	or cancellation of is	sued shares,	
provisions for implem (if not applicable,	indicate N/A)	ignicate ir not contain	eo in the amendmen	<u>Classii.</u>	
	,				
·	<del></del>		· · · · · · · · · · · · · · · · · · ·		
	·	<del>-</del>			
	· <u>-</u> · .				· • • • • • • • • • • • • • • • • • • •
· · · · · · · · · · · · · · · · · · ·	<u></u>	<del></del>			

	tion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirement of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without sha	reholder action and shareholder
■ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the ient for approval.	amendment(s)
	ed by the shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/16/2021 Dated		
Signature		
(By a direc selected, b	or, president or other officer – if directors or officers have an incorporator – if in the hands of a receiver, trustee. iduciary by that fiduciary)	or other court
	MIKE CHOI	
	(Typed or printed name of person signing)	··· <del></del>
	DIRECTOR OF OPERAT	TIONS
<del></del>	(Title of person signing)	