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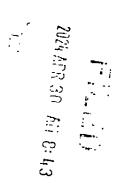
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SEECHEL PATEL	OD, PA	
DOCUMENT NUMB	ER: P06000113561		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	SEECHEL KANACHERIL		
-		Name of Contact Persor	1
-		Firm/ Company	
	P O BOX 8629		
-	·	Address	· · · · · · · · · · · · · · · · · · ·
_	CORAL SPRINGS, FL 3307	5	
		City/ State and Zip Code	e
	SKANACHERIL@GMAIL.	COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
SEECHEL KANACH	ERIL	at (<u>954</u>	873-5523
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, F1, 32303

Articles of Amendment to Articles of Incorporation of



SEECHEL PATEL OD, PA

(Name of Corporation as curren	tly filed with the Florida Dept. of State R 30 AF E: 43			
P06000113561	<i>πιε</i> 43			
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)			
A. If amending name, enter the new name of the corporation: SEECHEL KANACHERIL OD, PA	The new			
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word			
B. Enter new principal office address, if applicable:	2530 NE 24TH STREET			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	FORT LAUDERDALE, FL 33305			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 8629			
	CORAL SPRINGS, FL 33075			
D. If amending the registered agent and/or registered office ad-				
new registered agent and/or the new registered office address Name of New Registered Agent	<u> </u>			
(Florida s	treet address)			
New Registered Office Address:	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agen	<u>it:</u>			
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.			
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)

Example:

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	PT	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jo	<u>nes</u>		
X Add	<u>SV</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		<u>N</u> ame		Address
1) Change					
Add					
Remove					
2) Change		_			
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			 ·
Add					
Remove					

L. <u>If an</u> (Attac	nending or addi ch additional she	ng additional Art eets, if necessary).	icles, enter char (Be specific)	ige(s) here:			
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lf an	amandment or	ovides for an exc	hongo roclassifi	ication or can	rallation of ice	ind charge	
pro	visions for impl	ementing the amo	endment if not c	ontained in th	e amendment	itself:	
	(if not applicabl	le, indicate N/A)					
<u>. </u>					• "•	_ -	
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The date of such named a set(a) so	4/24/2024	if other than the
The date of each amendment(s) ad date this document was signed.	ioption:	If other than the
4/24	/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The folioeach voting group entitled to vote separately on the amend	
	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
4/24/2024		
Dated	4-1	
A		
Signature(By a d	irector, president or other officer – if directors or officers h	nave not been
selecte	d, by an incorporator – if in the hands of a receiver, trustee ted fiduciary by that fiduciary)	
	SEECHEL KANACHERIL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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