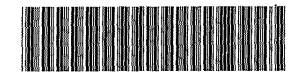
## 106000132544

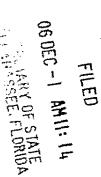
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies ertificates of Status
Special Instructions to Filing Officer:  Corclete document  by fely how Cay  12/07/26

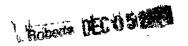
Office Use Only



4000,82,15,1684

W





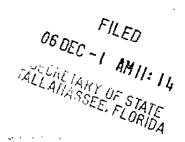
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: NAAR I	MAGING ASSOCIATED, P.A.
DOCUMENT NUMBER: P060001325	
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Dr. Claude Naar	·
. 0	Name of Contact Person)
	(Firm/ Company)
4897 N.W. 6TH COURT	<del></del>
	(Åddress)
PLANTATION, FLORIDA	33317
Comment of the control of the contro	City/ State and Zip Code)
For further information concerning this m	
Dr. Claude Naar	at (954 ) 792-0376
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
☐ \$35 Filing Fee	
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

v 542

## Articles of Amendment to Articles of Incorporation of



## NAAR IMAGING ASSOCIATED, P.A.

P06000132544

(Name of corporation as currently filed with the Florida Dept. of State)

(Document number of	of corporation (if known)
Pursuant to the provisions of section 607.1006, Fladopts the following amendment(s) to its Articles	
NEW CORPORATE NAME (if changing):	
NAAR IMAGING ASSOCIATES, P.A. "	r sage type
Must contain the word "corporation," "company," or "incompany and a professional corporation must contain the word "chartered".	rporated" or the abbreviation "Corp.," "Inc.," or "Co.") ed", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED - (OTHER THAN and/or Article Title(s) being amended, added or de	NAME CHANGE) Indicate Article Number(s) eleted: (BE SPECIFIC)
N/A	
<u></u>	
<del></del>	<del></del>
SOURCE SECURITION DA	
	<del></del>
	***
(Attach additions	al pages if necessary)
	ication, or cancellation of issued shares, provisions in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: 1/-28-06
Effective date if applicable:
(no more dian to day's unor amondment in 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  (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)
Or. Claude Naar  (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35