P06000147198

(Requestor's Name)			
(Ad	dress)	<u>.</u>	
(Ad	dress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
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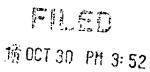
C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: Mairelys Ma BER: P0600014719		a, Psy.D., P.A.		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	Ignacio J. Seguro	ola, Esq.			
		Name of Contact Person	n		
	Mairelys Martinez	z, Psy.D., P.A.			
		Firm/ Company			
	3301 Ponce de L	eon Blvd., Third	Floor		
		Address	·····		
Coral Gables FL 33134					
	City/ State and Zip Code				
*!					
ıjse	gurola@segurolal		. 1.04		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
Ignacio J. Se	gurola	at (305	de & Daytime Telephone Number		
Name o	of Contact Person	Area Co	de & 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)		
	ling Address		Address Iment Section		
	sion of Corporations	Division of Corporations			
P.O. Box 6327		Clifton Building			
Tall	ahassee, FL 32314		Executive Center Circle		
		t altan:	assee, FL 32301		

Articles of Amendment Articles of Incorporation



viairelys Martinez, Psy.D., P.A.		Structure	
(Name of Corporation as currently filed wit	th the Florida Dept. of State)	William Son El	2
P06000147198			UMID.
(Document Number of Corpo	oration (if known)		
rsuant to the provisions of section 607.1006, Florida Statut Articles of Incorporation:	tes, this <i>Florida Profit Corporation</i>	adopts the following amendr	nent(s
If amending name, enter the new name of the corpora	tion:		
Mairelys Martinez-Segurola, Psy.D.,	P.A.	The ne	2141
ame must be distinguishable and contain the word "con Corp.," "Inc.," or Co.," or the designation "Corp," "Inc ord "chartered," "professional association," or the abbrev	c," or "Co". A professional corpe	porated" or the abbreviation	on
Enter new principal office address, if applicable:	SAME		
Principal office address <u>MUST BE A STREET ADDRESS</u>			
Enter new mailing address, if applicable:	SAME		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
If amending the registered agent and/or registered off new registered agent and/or the new registered office		ame of the	
Name of New Registered Agent SAME			
Name of New Registerea Agent	*		
	lorida street address)		
	•		
New Registered Office Address:	, Florio	da (Zip Code)	
	•	, ,	
ew Registered Agent's Signature, if changing Registered			
hereby accept the appointment as registered agent. $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	amiliar with and accept the obligati	ons of the position.	

Signature of New Registered Agent, if changing

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 Remove Y Mike Jones X Add SV Sally Smith Type of Action (Check One) Title Name Address 1) Change	Example: X Change	<u>PT</u>	John Doe	
Type of Action (Check One) 1) Change Add Remove 2) Change Add Remove 3) Change Add Add Add Add Add Add Add Add Add Ad	X Remove	<u>v</u>	Mike Jones	
(Check One) 1) Change	X Add	<u>sv</u>	Sally Smith	
Add Remove 2) Change Add Remove 3) Change Add Add Add Add	Type of Action (Check One)	Title	Name	<u>Addres</u> s
Remove	1) Change			
Add	[
Remove	2) Change			
ChangeAdd	Add			
Add	Remove			
	3) Change			
Remove	Add Remove			
4) Change	4) Change			
Add				
Remove				
5)	·			
Remove	Remove			
6) Change	6) Change			
Add				

<mark>f amending or adding additional Arti</mark> Attach <i>additional sheets, if necessary).</i>	(Be specific)
	(
	.
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indifferent it not contained in the amendment itself:
(у ног аррпсаоле, таксые тА)	

The date of each amendment(s) addate this document was signed.	loption: October 28, 2014	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated October	28, 2014	
Signature _		
(By a disselected	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	Ignacio J. Segurola	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	