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SECRETARY OF STATE
ALL AHASSEE, FLORID

N.C.
C.COULLIETTE
FEB 1 6 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>SERVICE R</u>	D CORP.	E
DOCUMENT NUMBER: P070000023	348	0
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	•
	ne Rodriguez	
(Name of	Contact Person)	
	Legal Services Corp.	
(Firm	/ Company)	•••
	AVENUE, SUITE - 25	
(A	ddress)	
HIALEAH G	ARDENS, FL 33027	
	e and Zip Code)	
For further information concerning this matter, pl	ease call:	
A. RODRIGUEZ	at (305) 231-7003	
(Name of Contact Person)	(Area Code & Daytime 7	elephone Number)
Enclosed is a check for the following amount mad	de payable to the Florida Depa	rtment 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 Circ Tallahassee, FL 32301	cle

Articles of Amendment to Articles of Incorporation of

		O CORP.	&	
(Name of Corporation as cu	urrently file	d with the Florida Dept	. of State)	
	0700000		6	
(Document)	Number of C	orporation (if known)		
Pursuant to the provisions of section 607. following amendment(s) to its Articles of In			Profit Corporation	adopts the
A. If amending name, enter the new nam	e of the cor	poration:	· .	
SERVICE RD MEDICAL CENTER O				
The new name must be distinguishable "incorporated" or the abbreviation "Corp" (Co". A professional corporation nassociation," or the abbreviation "P.A." B. Enter new principal office address, if	p.," "Inc.," name must	or Co.," or the design	ation "Corp," "Inc,	" or
(Principal office address MUST BE A STR		RESS)	Z	
			AST SSR	
	,		7 A	~ home
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF)	F STAT	S C C
			A	7
	*			
D. If amending the registered agent and/ new registered agent and/or the new i			ida, enter the name	of the
Name of New Registered Agent:				
New Registered Office Address:		(Florida street addres	s)	
			, Florida	
		(City)	(Zip Coo	(e)
New Registered Agent's Signature, if cha I hereby accept the appointment as regist position.			d accept the obligat	ions of the
	٠			
	Signature	of New Registered Ager	at, 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) Type of Action <u>Address</u> **Title** <u>Name</u> ☐ Add ☐ Remove □ Add Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/A F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

Th	e date of each amendment(s) adoption: 02/09/2009
Eff	fective date if applicable: 02/09/2009
	(no more than 90 days after amendment file date)
Ad	loption of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted 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"
	by
	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.
	Dated 02/09/2009
	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)
	RENE VAZQUEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)