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Amend/M



MAY 0 3 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section

· Division of Corp	orations		•		
NAME OF CORPO	RATION: BERRYHIL	L EYE CARE, II	NC.		
DOCUMENT NUMBER: P07000029667					
	of Amendment and fee are su	hmitted for filing			
Please return all corre	spondence concerning this ma	tter to the following:			
	EMILY J. WHITM	IAN			
		Name of Contact Person	1		
	160 Blacksool Dr	Firm/ Company			
	160 Blackpool Dr	Address			
	Antioch, TN 370				
		City/ State and Zip Cod	e		
dre	milywhitman@yal	hoo com			
<u> </u>	,,	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
EMILY J. WH	HITMAN	at (850	292-7062		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r 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)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address		Address		
	ision of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
tun	annuove, i to ver i "		assee, FL 32301		

Articles of Amendment to Articles of Incorporation

FIL	ED
: " APR 30	All .
SECRETARY	717 FU: 58

BERRYHILL EYE CARE, INC,

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

P07000029667

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corporate BERRYHILL EYE CARE OF MILTON	I INC The n
	poration," "company," or "incorporated" or the abbreviati ," or "Co". A professional corporation name must contain t iation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	6096 Berryhill Rd
	Milton, FL 32570
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Emily Whitman
	160 Blackpool Dr
	Antioch, TN 37013
	74110011, 114 07010
D. If amending the registered agent and/or registered office and/or the new registered office and/o	ce address in Florida, enter the name of the
new registered agent and/or the new registered office and Name of New Registered Agent	ce address in Florida, enter the name of the
Name of New Registered Agent	ce address in Florida, enter the name of the address: orida street address)
Name of New Registered Agent (Flo	ce address in Florida, enter the name of the address:

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.

Example: X Change	<u>PT</u>	John D	<u>oc</u>		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
_X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change Add Remove				·····	
2) Change Add Remove	*****·	_	,	_	
3) Change Add Remove		_			
4) Change Add Remove		_			
5) Change Add Remove		_			
6) Change Add Remove		_			

f amending or adding additional Arti- attach additional sheets, if necessary).	
f an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption: APII 1, 2012
Effective date if applicable: April 1, 2012
(no more than 90 days after amendment file date)
Adoption 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" (voting group)
(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.
Dated 4-1-12
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)
Emily J. Whitman
(Typed or printed name of person signing)
President
(Title of person signing)