P07000122850

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

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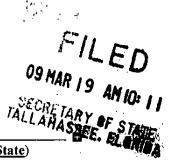
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>IQUEST SURGERY CENTER INC</u>				
DOCUMENT NUMBER: P0700	0122850	12		
The enclosed Articles of Amendment a	nd fee are submitted for filing.			
Please return all correspondence conce	ning this matter to the following:			
·	IVAN CORO			
IG	(Name of Contact Person) VEST SURGERY COMER, 7	W(
<u> </u>	ST DADE SURGERY-CENTER;INO (Firm/ Company)			
	8506 SW 8 ST SUITE 246 (Address)			
<u> </u>	MIAMI FLORIDA 33144 (City/ State and Zip Code)			
For further information concerning this	matter, please call:			
IVAN CORO (Name of Contact Person)	at (305) 244 2546 (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following a	nount made payable to the Florida Department of State:			
\$35 Filing Fee \$43.75 Filing Fe Certificate of Sta		;		
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			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



IQUEST SURGERY CENTER INC.

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

(Name of Corporation as currently filed with	ine Florida Dept. of State	9
P07000122850		
(Document Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida Statu following amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Profit C</i>	Corporation adopts th
A. If amending name, enter the new name of the corporation	<u>n:</u>	•
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co. "Co". A professional corporation name must contain association," or the abbreviation "P.A."	," or the designation "C	orp," "Inc," or
B. Enter new principal office address, if applicable:	AIMEE DE LA ROSA	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1385 SW 20 ST MIAMI I	FLORIDA 33175
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		·
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-		r the name of the
		•
New Registered Office Address: (Flor	ida street address)	•
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am position.		the obligations of th
Signature of New	Registered Agent, if chan	ging

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PRESID	IVAN CORO	9481 HOLYDAY ROAD CUTLER BAY FLORIDA 33157	_
SECET	IVAN CORO	9481 HOLYDAY ROAD CUTLER BAY FLORIDA 33157	Add Remove
PRES	AIMEE DE LA ROSA	13985 SW 20 ST MIAMI FLORIDA 33175	Add Remove
(attach ad	ing or adding additional Articles Iditional sheets, if necessary). (B I MUST CHANGE SHOWING AIMI		ECRETARY
provisio	nendment provides for an exchanons for implementing the amendnot applicable, indicate N/A)	ge, reclassification, or cancellation of is nent if not contained in the amendment	sued shares, itself:
			:

The date of each amendment(s) adoption: 12/31/2008		
Effective date if applicable:	12/31/2008	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ad 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	3/01/09	
Signature	a director, providence of other officer – if directors or officers have not been	
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
арр	onned inductory by that inductory)	
	(Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
	(Title of person signing)	