## P0800000 1557

(Re	equestor's Name)	,
(Ac	Idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to		:





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## **COVER LETTER**

TO: Amendment Section

Division of Corporation	ons			
NAME OF CORPORATI	on: Woodl	ands Medica	al Specialists	
DOCUMENT NUMBER:	<u> </u>	0001557		
The enclosed Articles of Ar	nendment and fee are su	bmitted for filing.		
Please return all correspond	lence concerning this mat	ter to the following:		
	Bethany	Rafield Contact Person  S Medical  Firm/Company	FO	
<del></del>	Wood land	15 Neducal	Specialists	
	4724 N. 7	avis Havy Address		
		Address		
	Pensacola 1	FL 32503		
Pensacola FL 32503 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
	E-mail address: (to be us	ed for future annual report	notification)	
For further information con	cerning this matter, pleas	e call:		
Bethany	Barfield	at (		
Name of Co	ntact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made p	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)	
	ent Section of Corporations	Amend Divisio	Address Iment Section on of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation

	Articles of Incorpo	ration		
Woodlands M	edical Spec	ialists P. A	l .	
	oration as currently file		ot. of State)	
9000	00001557			
/ <i>U U</i>	ocument Number of Cor	poration (if known)		
		,		
Pursuant to the provisions of section 607.1006, Fi its Articles of Incorporation:	orida Statutes, this <i>Flori</i>	da Profit Corporation a	idopts the following ar	nendment(s)
A. If amending name, enter the new name of the	he corporation:			
				ie new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," of	Corp." "Inc," or "Co".	A professional corpor	orated" or the abbration name must con	eviation tain the
B. Enter new principal office address, if applie				<u></u>
(Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u> )			
	_		C11K	177
			<u></u>	<u> </u>
C. Enter new mailing address, if applicable:			ائن شا. مينا هندا	င် ကိ
(Mailing address MAY BE A POST OFFICE	<u> BOX</u> )	***	**************************************	العسب
	_			
	_			<del></del>
D. If amending the registered agent and/or reg		n Florida, enter the na	me of the	
new registered agent and/or the new registe	ered office address:			
Name of New Registered Agent				
	(Florida street ad	ldress)		
N B 1 . 100 411			ni it	
New Registered Office Address:	(City)		_, Florida (Zip Code	 e)
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered age	ent. I am familiar with a	and accept the obligation	ns of the position.	
	Signature of New Registe	ered 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.

Example: X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Thomas B. Tan	4724 N. Davis Huy Pensacola FL 32503
Add			Pensacok FL 32503
Remove			
2) K Change	PD	David P. Bernstein	
_ <b>Æ</b> Add			
Remove		Irfan H. Ahmed	
3) Change	SD	Ittan H. Annied	
Add Remove			
4) Change	SD	Karen G. Snow	u
Add		7,000	
Remove			
5) Change	VD	Rami Owera	//
<b>X</b> Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: March 30, 2016 date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not be listed as the
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)	
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 4-1-16 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)	
David P. Bernstein, M.D. (Typed or printed name of person signing)	
President	
(Title of person signing)	