

P08000032535

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 NOV 16 PM 2:51

Amend

NOV 19 2012

**T. BROWN**

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: KEYSTONE ORTHOPEDIC GROUP, INC.

DOCUMENT NUMBER: PD8000032535

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHARLES L. ERJAVEC

Name of Contact Person

KEYSTONE ORTHOPEDIC GROUP, INC.

Firm/ Company

5313 PAYLOR LN SUITE 100

Address

SARASOTA, FLORIDA 34240

City/ State and Zip Code

DGLEESON@KEYSTONE09.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Contact Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                        |                                                                                                     |                                                                                                                            |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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 Circle  
Tallahassee, FL 32301

RECEIVED  
12 NOV 16 AM 10:20  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2012

DAVID GLEESON  
KEYSTONE ORTHOPEDIC GROUP, INC.  
5313 PAYLOR LN STE 100  
SARASOTA, FL 34240

SUBJECT: KEYSTONE ORTHOPEDIC GROUP, INC.  
Ref. Number: P08000032535

We have received your document for KEYSTONE ORTHOPEDIC GROUP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The change of registered agent form can not be used solely to make a change in the principal office address. This change can be made by sending us an email to this address: [corpaddresschange@dos.state.fl.us](mailto:corpaddresschange@dos.state.fl.us)

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown  
Regulatory Specialist II

Letter Number: 512A00024372

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 NOV 16 PM 2:51

KEYSTONE ORTHOPEDIC GROUP, INC.

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

P08000032535

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

NA

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**

NA

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

NA

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

NA

(Florida street address)

New Registered Office Address:

NA

, Florida

(City)

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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.

**Example:**

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- 1) ☐ Change      PD      Charles L. ERJAVEC      7187 BOCA GROVE PLACE  
☐ Add      \_\_\_\_\_      \_\_\_\_\_      Unit 101  
☒ Remove      \_\_\_\_\_      \_\_\_\_\_      BRADENTON, FL 34202
- 2) ☒ Change      PD      DAVID GLEESON      604 OCEAN FRONT  
☐ Add      \_\_\_\_\_      \_\_\_\_\_      NEPTUNE BEACH, FL  
☐ Remove      \_\_\_\_\_      \_\_\_\_\_      32266
- 3) ☐ Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Add      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_
- 4) ☐ Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Add      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_
- 5) ☐ Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Add      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Remove      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_
- 6) ☐ Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ Add      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
☐ 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)

NA

The date of each amendment(s) adoption: 8/22/12

Effective date if applicable: NA  
(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)

☒ 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 8/22/12

Signature [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 Gleeson  
(Typed or printed name of person signing)

President  
(Title of person signing)