## P0800036656

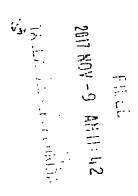
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C. GOLDEN NOV 13 2017

## COVER LETTER

NAME OF CORPOR	ration: <u>Soufler</u> ber: <u>PO 80000</u>	's Modical	Inc.		
DOCUMENT NUMB	BER: <u>PO 80000</u>	36654			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Grebony 5	ou Fleris			
	<del></del>	Name of Contact Persor	1		
	Southeris	Undical In	$\mathcal C$ .		
		Firm/ Company			
	Sautheris Medical Inc.  Firm/ Company  8901 Lee Vister Bud # 3003				
	Address				
	Olllandes FL 32829 City/ State and Zip Code				
	0 100000	City/ State and Zip Code	2		
E-mail address: (to be used for future annual report notification)					
For further information	n concerning this matter, pleas	se call:			
<u> Ynes</u>	Cautheris	at ( 954	868.4492		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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)		
<u>Mai</u>	ling Address	Street	Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation of

FILEL

Sou Heris Medical (Name of Corpora	InC.		2017 NOV -9 AH 11: 42
(Name of Corpora	ation as currently f	filed with the Florida Dept.	of State)
(1) 1 (2 - 10 - 1 (2)			Entre Sull Muritia
(Doc	ument Number of C	Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607.1006, Floritis Articles of Incorporation:	ida Statutes, this <i>Fl</i>	orida Profit Corporation ado	pts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:		
Spource Ortho Inc	<i>o</i> .		The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Cow word "chartered," "professional association," or the	ord "corporation," rp," "Inc," or "Ce	)". A professional corporati A."	on name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		8901 Lee V. Bud # 3003	17,FEL
		onlando, p	1 32829
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1901 Lee 1 But # 3003 Orlando, M	Vister
		BUH 3003	
		Orlando, M	72829
D. If amending the registered agent and/or regist new registered agent and/or the new registere		s in Florida, enter the name	of the
Name of New Registered Agent	) /A		<u> </u>
	(Florida street	address)	<del></del>
New Registered Office Address:		, i	Plorida
	(C	ity)	(Zip Code)
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.	egistered Agent: . I am familiar wit.	h and accept the obligations o	of the position.
Sis	gnature of New Reg	istered 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	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change		N/A		
Add				
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change			<del></del>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

v1 1 1 1 1	(Be specific)			
NIA				
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<del>_</del> -		<del></del>		
				· <u> </u>
			<del></del>	<u> </u>
If an amendment provides for an exch.	ange, reclassifica	tion, or cancellati	on of issued shar	es,
	<u>idment if not con</u>	tained in the ame	<u>ndment itself:</u>	
(if not applicable, indicate N/4)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)  N/A				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
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 document's effective date on the Department of State's records.	date will 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 by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"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 shareho action was not required.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/31/17	
Signature  By a director, president or other officer – if directors or officers have not bee	
selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
Typed or printed name of person signing)  President	
(Typed or printed name of person signing)	
(Title of person signing)	<del></del>
(Title of person signing)	