## P08000080380

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	#)
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(Do	cument Number)	
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## **COVER LETTER**

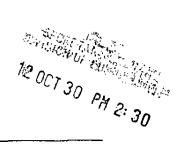
**TO:** Amendment Section Division of Corporations

**1**2)

NAME OF CORPORATION: THE AC	Cloent Clir	ilc
DOCUMENT NUMBER: POS DOO	280380	
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Grace Feman	Name of Contact Perso	n
The Accident	CLINIC Firm/ Company	
131 SW 9770 M	ve	
the annual of	Address	
EMODIL MA	S FL 330Z! City/ State and Zip Cod	5
Graceful Marke tin E-mail address: (to be us	_	
For further information concerning this matter, pleas	se call;	
Grad femandez	at ( <b>95</b> 4	397·3568
GYGO Fernandez  Name of Contact Person	<u> </u>	de & Daytime Telephone Number
Enclosed is a check for the following amount made I	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section		Address Iment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



The Accident Clinic INC.	$\circ v$
(Name of Corporation as currently filed with the	Florida Dept. of State)
PU80000 80380	<del></del>
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	* "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	_
(Principal office address MUST BE A STREET ADDRESS)	Pembroke Pines FZ
	pernerone pinks ic
	33025
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(same)
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	
	:33 <u>1</u>
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:(Ci	. Florida (Σip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent.—I am familia	e <b>nt:</b> we with and accept the obligations of the position.
Signature of New Registere	ed 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 <math>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	V	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Remove	•		

•	ticles, enter change(s) her (Be specific)	_	
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lf an amendment provides for an exc	hange, reclassification, o	r cancellation of issued	hares,
provisions for implementing the am	hange, reclassification, or endment if not contained	r cancellation of issued s in the amendment itself	thares,
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, of endment if not contained	r cancellation of issued in the amendment itself	thares,
provisions for implementing the am	hange, reclassification, o	r cancellation of issued in the amendment itself	shares,
provisions for implementing the am	hange, reclassification, o	r cancellation of issued in the amendment itself	shares,
provisions for implementing the am	hange, reclassification, or endment if not contained	r cancellation of issued the inthe amendment itself	shares,
provisions for implementing the am	hange, reclassification, o endment if not contained	r cancellation of issued the control of issued the control of itself in the amendment itself	shares,
provisions for implementing the am	hange, reclassification, o	r cancellation of issued in the amendment itself	shares,
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, of endment if not contained	r cancellation of issued in the amendment itself	shares,

The date of each amendment(s) adoption: 10-19-2012
Effective date if applicable: 10-19-2012
Effective date if applicable: 10-19-2012 (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 east 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 10-19-2012
Signature  (By a director, president of 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)
CIVUCE FEVNANDEZ (Typed or printed name of person signing)  President
President (Title of person signing)