P08000090279

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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORA	TION: JAIME H MEJIA	MD PA	
DOCUMENT NUMBE	R: P08000090279	·	
	Amendment and fee are su	bmitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
J.	АІМЕ Н.МЕЛІА		
_	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	1
Ja	AIME H. МЕЛА MD PA		
_		Firm/ Company	
90	064 Laurel Ridge Dr		
	.,	Address	
N	Iount Dora Fl 32757		
_		City/ State and Zip Code	e
yanigel	@fastmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information (concerning this matter, pleas	se call:	
Yanira Gell		at (⁷⁸⁶	277-7991
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	urtment of State:
S35 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)
Amen	ng Address dment Section on of Corporations	Amend	Address ment Section on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Ar	mendment	1
to		·,
Articles of Inc	orporation	-35
TAIME H	METIA MOPA	
(Name of Corporation as currently	y filed with the Florida Dept. of State)	Je jak W
Dheni	DDD9D779	
(Document Number of	f Corporation (if known)	1 0
Pursuant to the provisions of section 607.1006, Florida Statutes, this attacks of Incorporation:	Florida Profit Corporation adopts the following am	endment(s) to
A. If amending name, enter the new name of the corporation:		
	The	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "(word "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name must conte	
B. Enter new principal office address, if applicable:	9064 Laurel Ridge Dr	
(Principal office address MUST BE A STREET ADDRESS)	Mount Dora Fl 32757	
		
		<u> </u>
C. Enter new mailing address, if applicable:	ancular and Pidae T)
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	9064 Lancel Ridge I Mount Dona, FL 3275	
	Mount Dona, FL 3275	7
D. If amending the registered agent and/or registered office addr		
new registered agent and/or the new registered office address:	<u>:</u>	li li
Name of New Registered Agent		
New Registered Office Address: 9064 Laurel	eet address) fount Don	z-
New Registered Office Address: 9064 Laurel	E Ridue Dr Florida 327.	5 .7
	(City) (Zip Code)	
No. B. Constant and St. Constant and Constan		u.
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar w		
	and accept the winguinns of the position.	
		
Signature of New R	legistered Agent, if changing	1

(Attach additional sheets Please note the officer/di P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	and/or Director being added: s, if necessary) irector title by the first letter of the office title: President; T= Treasurer; S= Secretary; D= Director; TR= = Chief Financial Officer. If an officer/director holds more er, Director would be PTD. d in the following manner. Currently John Doe is listed as the aves the corporation, Sally Smith is named the V and S. These e, and Sally Smith, SV as an Add.	than one title, list the first letter of each office e PST and Mike Jones is listed as the V. There is
Example: <u>X</u> Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	PT JAINE HEJIX	9064 Laurel Ridge Dr
/ Add	,	4064 Laurellidge Dr Hount Dom FL 3275
Remove		,
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
i. a		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

f 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)	Auach additional sheets, if necessary).	(Be specific)	
provisions for implementing the amendment if not contained in the amendment itself:			
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provisions for implementing the amendment if not contained in the amendment itself:			<u> </u>
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provisions for implementing the amendment if not contained in the amendment itself:			
provisions for implementing the amendment if not contained in the amendment itself:			<u> </u>
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)			
provisions for implementing the amendment if not contained in the amendment itself:			1
provisions for implementing the amendment if not contained in the amendment itself:			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
(ij noi applicable, marcule N/A)	provisions for implementing the am	endment if not contained in the amendment itself:	
	(ij noi applicable, inalcale NIA)		
			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	i
Effective date <u>if applicable</u> : (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 dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ 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):	nt
"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.	r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/21/2017 Signature Jame H. Mejia	
(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 counappointed fiduciary by that fiduciary)	t
Taine H. Wejia (Typed or printed name of person signing)	
Persident	
(Title of person signing)	