## 000108387

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(,
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C. GOLDEN APR - 6 2019

## COVER LETTER

FO: Amendment Section Division of Corporations

•	Michout C. Cam.	Eb. foro for				
	PORATION: Michael S. Stro	00c, D.O., P.A.				
DOCUMENT NU	MBER:					
The enclosed Artic	les of Amendment and fee are	submitted for filing.				
Please return all co	rrespondence concerning this	matter to the following:				
	Michael S Strobbe					
	Name of Contact Person					
	Michael S. Strobbe, D.O., P.A.					
	Firm/ Company					
	4916 Caney Court					
	Address					
	Port Richey, FL 34008					
	/ / .	City/ State and Zip Co	de			
	tstrobbe/	a acmel.	lom			
	E-mail address: (to be)	iscilsor future annual repor				
For further informati	on concerning this matter, plea	sce calls				
	g maner, pres	are care.				
Michael Strobbe		at i	868-2151			
Name	of Contact Person	Area Co	ode & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment of State			
■ \$35 Filing Fee	□543.75 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)			
	ling Address	Street .	Address			
	endment Section	Amend	ment Section			
	sion of Corporations	Division of Corporations				
P.O. Box 6327 Taflahassee, Ft, 32314		Clifton Building				

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

FILED

2019 MAR 25 AM 8: 07

Michael S, Strobbe, D O., P.A.	2019 MAR 25 AM 8: 0
(Name of Corporation as currently filed with the Florida Dept. of State)	
P08000108387	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following Articles of Incorporation:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:	
	_The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the e "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	thbreviation contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<ol> <li>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;</li> </ol>	
Name of New Registered Agent	
(Florada strert address)	
New Registered Office Address:	
(City) Zip C	ode)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
generally in graning	
_	
Signature of New Registered Agent, if changing	

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 PSF 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:  $\underline{X}$  Change  $\overline{PL}$ John Doe X Remove  $\overline{\Lambda}$ Mike Jones  $\underline{X}$  Add SVSally Smith Type of Action Little Name Address (Check One) 1)  $\frac{X}{--}$  Change D/P/S·T Michael S Strobbe 4916 Caney Court Port Richey, FL 34668 Add\_ \_\_ Remove 2) \_\_\_\_\_ Change \_\_\_\_ Add \_\_\_\_\_Remove 3.) \_\_\_\_ Change \_ Add \_ Кепкес 4) \_\_\_\_ Change \_\_\_\_ Add \_ . \_ Remove 5) \_\_\_ Change \_\_\_\_ Add \_\_\_ Remove が) \_\_\_\_\_Change

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)

\_\_\_\_ Add

\_\_\_ Remove

	adding additional A il sheets, if necessary	r. (Be specific	.7			
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an amendment i	provides for an exch	ange, reclassiti	ication, or cane	cilation of issued	shares.	
	piementing the amei	ndment if not c	ontained in the	amendment itse	<u>lf:</u>	
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The date of each amendment(s) ad	03/13/2019		
date this document was signed	obnoa:		if other than the
Effective date if applicable:			
	mo more	e than 90) days after amendment file dato)	<del></del> -
Note: If the date inserted in this blo document's effective date on the Dep	ick does not meet the artment of State's reco	e applicable statutory filing requirements, this date words.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u>	<u>E</u> )	
■ The amendment(s) was were adop by the shareholders was were suff	led by the shareholder icient for approval	rs. The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were appromist be separately provided for ea	ived by the shareholde tich voting group entit	ers through voting groups. The following statement led to vote separately on the amendmentist	
		asswere sufficient for approval	
by			
	(voting group)		
☐ The amendment(s) was were adopte		vetors without shareholder action and shareholder	
action was not required.		and the second s	
Dated3/	20 /19	<del></del>	
Signature			
wiccieu, o	tor, preside <del>nt as o</del> ther y an incorporator—it fiduciary by that fiduc	r officer – if directors or officers have not been fin the hands of a receiver, trustee, or other court coary)	• <u> </u>
-	(Typed or prir	nted name of person signing)	
	Ĺ	D/P/S/T.	
	Т)	Title of person signing)	