## P090000326/2

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(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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80/20/12

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Lee County	/ Medical Solutio	ons, Inc.
	BER: P0900003261		
•	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	Kristen J Touhey	,	
		Name of Contact Person	1
	Lee County Medi	cal Solutions, Inc	C
		Firm/ Company	
	3822 Broadway A	Avenue	
		Address	
	Fort Myers, Florid		•
	TOTT WIYOTS, THOTE	· · · · · · · · · · · · · · · · · · ·	
		City/ State and Zip Code	
ww	w.medicalsolutior	ns@livwe.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Kristen J. To	uhey	at (239	, 628-1124
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment 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>Ma</u>	iling Address		Address
	endment Section	Amendment Section	
	ision of Corporations		n of Corporations Building
P.O. Box 6327 Tallahassee, FL 32314			xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

FILED

Lee County Medical Solutions, Inc.		2012 SEP 19 PM 1	: 56
(Name of Corporation as currently filed with the F	lorida Dept. of State)	5015 2FL 13	
P09000032612		STORETARY OF ST TALLAHASSEE, FL	ORIDA
(Document Number of Corporation (in	f known)	IALLMIN	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporatio	on adopts the following an	nendment(s) to
A. If amending name, enter the new name of the corporation:			
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 cor	corporated" or the abbre	e new eviation tain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n/a		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address.  Name of New Registered Agent n/a		name of the	
(Florida stre	eet address)		
New Registered Office Address: (City)		rida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	<u>.</u>		
Signature of New Registered A	Igent, if changing	<del></del>	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SD	Frank Seda	3822 Broadway Avenue
Add			Fort Myers, Florida
Remove			33901
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change	<del></del>		
Add			<del>\</del>
Remove			· \
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	-
	3
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	:
	,
	,
	•
If an amendment provides for an exchange, reclassification	on, or cancellation of issued shares,
If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contains	on, or cancellation of issued shares, ined in the amendment itself:
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If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contains	on, or cancellation of issued shares, ined in the amendment itself:

The date of each amendment(s) adoption: September 18, 2012		
Effective date <u>if applicable</u> : S		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated Septe	ember 18, 2012	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court	
appo	inted fiduciary by that fiduciary)	
	Kristen J. Touhey	
	(Typed or printed name of person signing)	
	Incorporator/President	
	(Title of person signing)	