

P090000060139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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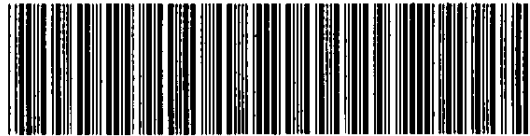
(Business Entity Name)

(Document Number)

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*Amend*

01/08/10--01032--008 \*\*35.00

FILED

2010 JAN 21 PM 12:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*ADR*  
*1/22/10*

*\*00789, 00524, 00671*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Dr. RAMESH GOPALASWAMY, P.A.

DOCUMENT NUMBER: P 09000060139

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAMESH GOPALASWAMY  
Name of Contact Person

Dr. RAMESH GOPALASWAMY, P.A.  
Firm/ Company

2506 HUNTERS RUN WAY  
Address

WESTON, FL 33327  
City/ State and Zip Code

rgopalaw @ pol.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAMESH GOPALASWAMY at ( 954 ) 385-2732  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |  |   |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is enclosed) |
|---|--|--|---|

**Mailing Address**

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

**Street Address**

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



RECEIVED

10 JAN 21 AM 11:06

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
TALLAHASSEE, FLORIDA

January 11, 2010

Dr. Ramesh Gopaldaswamy  
2509 Hunters Run Way  
Weston, FL 33327-1435

SUBJECT: DR.RAMESH GOPALASWAMY,P.A.  
Ref. Number: P09000060139

We have received your document for DR.RAMESH GOPALASWAMY,P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the title for Rekha M. Pandya (for example Vice President, Secretary, Treasurer etc) Just the title "officer" is not sufficient.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 310A00000778

*See correction*

RECEIVED

2010 JAN 22 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2009

DR. RAMESH GOPALASWAMY  
2509 HUNTERS RUN WAY  
WESTON, FL 33327-1435

SUBJECT: DR. RAMESH GOPALASWAMY, P.A.  
Ref. Number: P09000060139

We have received your document for DR. RAMESH GOPALASWAMY, P.A., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson  
Document Specialist Supervisor

Letter Number: 909A00039299

*See enclosed chh for \$35.00  
Thanks. [Signature] 1/4/10*

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

Dr. RAMESH GOPALASWAMY, P.A.

2010 JAN 21 PM 12:58

(Name of Corporation as currently filed with the Florida Dept. of State)

P 09000060139

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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 abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

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 in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

New Registered Office Address:

(Florida street address)

(City)

, Florida  
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered 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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Vice President	REKHA M. PANDYA	2506 HUNTERS RUNWAY WESTON, FL 33327	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

**F. 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)*

N/A

Effective date if applicable: \_\_\_\_\_  
(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 cast 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 12/21/09

**Signature**

(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 court appointed fiduciary by that fiduciary)

RAMESH GOPALASWAMY

(Typed or printed name of person signing)

Director

(Title of person signing)