## P09000001071

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Amend/cus (10/11/13/13

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: ADW MED, INC. P09000061071 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alexander Wargo Name of Contact Person **Barr Medical Center** Firm/ Company 2350 West Oakland Park Blvd. Suite 900 Address Oakland Park, Florida, 33311-1409 City/ State and Zip Code browardmedicalpartners@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alexander Wargo Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **☑**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

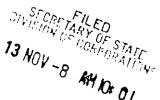
**Mailing Address** 

TO: Amendment Section

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

## Articles of Amendment to Articles of Incorporation of



ADW MED, INC.			
(Name of Corporation as P0900061071	currently filed with the F	Iorida Dept. of State)	
	t Number of Corporation (	if known)	<del></del>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	n adopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
NA			The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp," "Inc," or	'Co". A professional corp "P.A."	poration name must contain the
B. Enter new principal office address, if applicable:		2350 W. Oak	iang PK Bivg
(Principal office address <u>MUST BE A S</u>	<u>(REET ADDRESS</u> )	Suite 900	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Oakland Park	k, FL 33311
		2350 W. Oakland Pk Blvd	
(	, , , , , , , , , , , , , , , , , , ,	Suite 900	
		Oakland Park	k, FL 33311
D. If amending the registered agent an new registered agent and/or the new	d/or registered office add v registered office addres Alexander D. W	<u>s:</u>	name of the
Name of New Registered Agent		d Pk Blvd. Ste 90	 
		rect address)	<del></del>
New Registered Office Address:	Oakland Park		ida 33311-1409 (Zip Code)
	(City,	, ( 101	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist		with and accept the obligat	

## 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VT	Alexander Wargo	862 NW 67th Avenue
Add			Plantation, FL
Remove			33317-1238
2) Change			
Add			<del>., </del>
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			* · · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	. (Be specific)
***************************************	
provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)  Exchange of 50% of shares (50	total Shares) from Alex Wargo, D.O.
o Alexander D. Wargo.	total chares, non Alex varge, b.c.
<del></del>	
Alex D. Wargo, D.O. to own 50	Shares (50%)
and Alexan der D. Wargo to owi	n 50 Shares (50%)
Amend Article IV (Registered A	gent) from Original Articles Of Incorperation
	on of Page 1. Section D. (Above)
o Alexander D. Wargo as writte	en of Page 1, Section D (Above)

date this document was signed.	_, if other than the
Effective date if applicable: 11/04/2013	
(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 Months, 4,20 13	
Signature (elex Wards)	_
(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)	
Alex D. Wargo, D.O.	_
(Typed or printed name of person signing)	_
President	<del></del>
(Title of person signing)	