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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APPROVE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	V H C OF SOUTHWEST	FL INC
DOCUMENT NU	JMBER:	27-1328801	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	nis matter to the following:	
		David Hambor	
		Name of Contact Person	
		ing Home Companions	
		Firm/ Company	
	16	341 Arbor Ridge Dr. Address	
		Addiess	
, 1		ort Myers, Fl 33908 City/ State and Zip Code	
.*	hamb	por@comcast.net	
	E-mail address: (to be us	ed for future annual report notification)	
For further inform	ation concerning this matter	r, please call:	
	David Hambor	at (239)	989-9312
Name	e of Contact Person	Area Code & Daytime T	Telephone Number
Enclosed is a chec	k for the following amount:	made payable to the Florida Depa	artment 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
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir	rcle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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

VHCOFSOUTHWESTFLINC 27-1328801

(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:

	Home Companions Inc.	The new
name must be distinguishable and contai abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc," or	"Co". A professional corporation
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
	-	
D. If amounting the projectioned execut and/	an magistared office address in Fla	vide anter the name of the
D. If amending the registered agent and/o new registered agent and/or the new r		rida, enter the name of the
		rida, enter the name of the
new registered agent and/or the new r	egistered office address: David Hambor	rida, enter the name of the
new registered agent and/or the new r	egistered office address:	
new registered agent and/or the new r	egistered office address: David Hambor 16341 Arbor Ridge Dr.	
new registered agent and/or the new r	egistered office address: David Hambor 16341 Arbor Ridge Dr. (Florida street addres	rs)
Name of New Registered Agent:	egistered office address: David Hambor 16341 Arbor Ridge Dr. (Florida street address Fort Myers (City) nging Registered Agent:	rs) , Florida <u>33908</u> (Zip Code)

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>	Address	Type of Action
			☐ Add ☐ Remove
	MA		☐ Add☐ Remove
	mending or adding additional Artic ach additional sheets, if necessary).		
	an amendment provides for an exch ovisions for implementing the amen (if not applicable, indicate N/A)		
	NJA		

The date of each amendmen	t(s) adoption: December 3 2009
Effective date if applicable:	(date of adoption is required) December 5, 2009
Enterive date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Dec	tember 3, 2009
(By	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)



December 10, 2009

ANGELIQUE MULLEN 4750 N. FEDERAL HWY SUITE 203 FORT LAUDERDALE, FL 33308

Re: Document Number 515763

The Articles of Amendment to the Articles of Incorporation for DR. JOHN J. MADONNA, P.A. which changed its name to DR. JOHN J. MADONNA, INC., a Florida corporation, were filed on December 7, 2009.

The certification requested is enclosed.

Should you have any question regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Tracy L Lemieux Regulatory Specialist II Division of Corporations

Letter Number: 109A00037756



I certify the attached is a true and correct copy of the Articles of Amendment, filed on December 7, 2009, to Articles of Incorporation for DR. JOHN J. MADONNA, P.A. which changed its name to DR. JOHN J. MADONNA, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is 515763.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Tenth day of December, 2009

THE STATE OF THE S

CR2EO22 (01-07)

Kurt S. Browntng Secretary of State