

## Florida Department of State

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN JULIO C. MACHADO, JR., M.D. P.A.

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TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

305 728 2288

03/26/2010 13:28

#963 P.002/005

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## **COVER LETTER**

NAME OF CODE	OD ATTION.	ulio C. Machado, JR., M.D.	РΔ
NAME OF CORP	PORATION:JU	JIIO O. MACHAGO, OTC., MI.D.	1.0
DOCUMENT NU	MBER:	P09000097635	
The enclosed Artic	les of Amendment and fee ar	e submitted for filing.	
Please return all co	rrespondence concerning this	matter to the following:	
		s M. Machado, Esq.	
	Na	ime of Contact Person	<del></del>
	Cario	s M. Machado, P.A.	
	Guile	Firm/ Company	
	•		
	2030 Do	ouglas Road, Suite 210	
		- Address	
	Coral (	Gables, Florida 33134	
	Cir	ty/ State and Zip Code	
		a Bornardovi on m	
-	E-mail address: (to be used	o@smgqlaw.com I for future annual report notification)	
		•	
For further informa	ation concerning this matter,	please call:	
Carlo	e M. Machado, Eso		7-1000
Name	of Contact Person	at ( 305 ) 37 Area Code & Daytime Telep	phone Number
•		·	
Enclosed is a chec	k for the following amount m	ade payable to the Florida Departr	nent of State:
2 \$35 Filing Fee	☐ \$43.75 Filling Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A		Street Address Amendment Section	

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

H 10000067495 3

## Articles of Amendment to Articles of Incorporation of

Julio C. Mach	ado, JR., M.D. P.A.	,	
(Name of Corporation as curren	itly filed with the Florida I	Dept. of State)	
P090	00097635		
(Document Numb	per of Corporation (if known	)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	, Florida Statutes, this Flor	ida Profit Corporation a	dopts the following
A. If amending name, enter the new name of	the corporation:		
J.C. Macha	ido, Jr., M.D., P.A.	•	The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "profi	designation "Corp," "Inc,"	or "Co". A professiona	atea" or the il corporation
B. Enter new principal office address, if appli		· · · · · · · · · · · · · · · · · · ·	<del></del> .
(Principal office address <u>MUST BE A STREET</u>			<b>Æ</b> ∰ <b>5</b>
•			
			HAR 26
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	· ·F ROY)		SHE LE
(Praining names) MAI DEA 1 CON OTTIC			
,			<u>「</u>
			2m &
D. If amending the registered agent and/or renew registered agent and/or the new registered.	egistered office address in l tered office address;	florida, enter the name i	<u>or the</u>
Name of New Registered Agent:		<del></del>	
New Registered Office Address:	(Florida street add	dress)	
Wew Registered Office Address.	(2101188 31708) 888	•	
-	(City)	, Florida (Zip Code)	
	(C1137)	(Elp Cour)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as	g Registered Agent:	I accept the obligations of	fiha nosition
s nereby accept the appointment as registered as	çeni 1 am jamınıar with and	i accept ine congations of	me posmon.
	gnature of New Registered A	Agent if shareing	
Si	gnature oj ivew kegisterea i	igeni, y chunging	

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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>	Name	Address	Type of Action
			☐ Add ☐ Remove
<del></del>			<b>—</b> –
			Remove
E. If amen (attach a	ding or adding additional Aradditional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
provisi	<u>lons for implementing the am</u>	schange, reclassification, or cancella endment if not contained in the am	ition of issued shares, endment itself:
	not applicable, indicate N/A)		
			·

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The date of each amendmen	Ke) adoption: 03/25/10
	(acts of acoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment vere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statem ad 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)
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and sharehold
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	3/25/10
Signature	40mm
(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 10 trector (Title of person signing)

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