P-(\$

P10000101022

(Req	uestor's Name)	,		
(AbbA)	ress)			
(Add	ress)			
(City)	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
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p. (State As ... 02/25/11--01004--005 **35.00 ...) as |



C.COULLIETTE

FEB 25 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	CORPORATION: MY DOCTOR'S WALK IN CLINIC INC			
. DOCUMENT NU	MBER:	P10000101022		
	•	fee are submitted for filing.		
Please return all co	orrespondence concerni	ng this matter to the following:		
		NAGY S FARAG		
		Name of Contact Person		
		Firm/ Company		
	1209 BAY DRIVE			
		Address		
	В	ELLEAIR BEACH FL 33786 City/ State and Zip Code		
	DA			
	E-mail address: (to	C@PINTAX.FDN.COM be used for future annual report notification)		
For further information	ation concerning this m	natter, please call:		
O	ENNIS MAXEY	at (727) 548-4400		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	k for the following amo	ount made payable to the Florida Department of State:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status			
Mailing A		Street Address		
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	S WALK IN CLINIC INC	
(Name of Corporation as curi	rently filed with the Florida Dept. of State)	
P10	0000101022	
(Document Nu	mber of Corporation (if known)	
Pursuant to the provisions of section 607.106 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Corporation</i> adop	ts the following
A. If amending name, enter the new name	of the corporation:	
M K URGENT	MEDICAL CENTER INC	The new
abbreviation "Corp.," "Inc.," or Co.," or th	the word "corporation," "company," or "incorporated to designation "Corp," "Inc," or "Co". A professional corofessional association," or the abbreviation "P.A."	t" or the orporation
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE		-
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	e; ICE BOX) registered office address in Florida, enter the name of the	TIVE ON OF SOME OF STATE OF SOME OF SO
Name of New Registered Agent:	NAGY S FARAG	
New Registered Office Address:	1209 BAY DRIVE (Florida street address)	
	BELLEAIR BEACH , Florida 33786 (City) (Zip Code) sing Registered Agent: agent. Ilam jamiliar with and accept the obligations of the 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) **Title** Address **Type of Action** <u>Name</u> ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

The date of each amendment(s) adoption: 02/21/2011			
Effective date if applicable:		(date of adoption is required)	
	(no more than 9	00 days after amendment file date)	
Adoption of Amendment(s)	(<u>CH</u>	IECK ONE)	
The amendment(s) was/we by the shareholders was/w	• •	shareholders. The number of votes cast for the amendment(s) approval.	
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amen	dment(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	2/21/1		
Signature _ (By	a director, prosic	dent or other officer of directors or officers have not been	
sel	ected, by an incor	porator - if in the hands of a receiver, trustee, or other court	
арр	oointed fiduciary	by that fiduc iary)	
		NAGY S FARAG	
	(Ту	ped or printed name of person signing)	
•		,	
		PRESIDENT	
	(Title o	of person signing)	