Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110001858573)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC. Account Number: I20010000062 Phone: (323)962-8600 Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN MICHAEL J. GUILLORY-SMITH MD PA

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: MICHAEL	J. GUILLORY-SMITH N	MD PA
DOCUMENT NU	мвек: <u>Р1100002</u> 2	2256	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	rrespondence concerning thi	is matter to the following:	
Alle and a second		Barbara Dang of Contact Person)	
	(rante.	or Contact relacity	
	<u></u>	.egalzoom.com, Inc.	
	(Fig	rm/ Company)	
	100 W.	Broadway Suite 100	
		(Address)	
		andale, CA 91210 tate and Zip Code)	
For further informa	tion concerning this matter,		
	Barbara Dang	at (<u>323</u>) <u>962-860</u>	00 ×7950
(Name	of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a check	for the following amount n	nade payable to the Florida De	epartment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad	dress	Street Address	
Amendmen		Amendment Section	
	Corporations	Division of Corporations	3
P.O. Box 63	 ·	Clifton Building	71
Tallahassee	, FL 32314	2661 Executive Center C Tallahassee, FL 32301	ircie

Articles of Amendment to Articles of Incorporation of

MICHAEL J.	GUILLORY-SMITH MD PA	
(Name of Corporation as co	urrently filed with the Florida Dept. of State)	
	11000022256	
(Document F	Number of Corporation (if known)	
Pursuant to the provisions of section 607. following amendment(s) to its Articles of In	.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopt acorporation:	s the
A. If amending name, enter the new nam	e of the corporation:	
"incorporated" or the abbreviation "Corp	e and contain the word "corporation," "company," or p.," "Inc.," or Co.," or the designation "Corp," "Inc," or tame must contain the word "chartered," "professional	
B. Enter new principal office address, if a		30
(Principal office address <u>MUST BE A STR</u>	<u>VEET ADDRESS</u>)	F.C.
	· · · · · · · · · · · · · · · · · · ·	HA ST
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u>	ble: TICE BOX	SEE, FLORID
D. If amending the registered agent and/o new registered agent and/or the new r		ア
Name of New Registered Agent:	Michael Guillory-Smith	
New Registered Office Address:	2047 Paim Beach Lakes Blvd. Suite 300 (Florida street address)	
	West Palm Beach , Florida 33409 (City) (Zip Code)	
New Registered Agent's Signature, if chast I hereby accept the appointment as registed position.	ered agent. I am familiar with and accept the obligations of	f the
	Signature of New Registered Agent, if changing	
	Page 1 of 3	

<u>If amendi</u>	ng the Officers and/or Directors,	enter the title and name of each officer/o	lirector being
removed a	and title, name, and address of ea-	ch Officer and/or Director being added:	-
(Attach aa	ditional sheets, if necessary)		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			_ 🚨 Add
			_ Remove
			_ D Add
			_ Remove
			
			_ G Kemove
			_
F. If ame:	ding or adding additional Article	es, enter change(s) here:	
	additional sheets, if necessary). (
			
	· · · · · · · · · · · · · · · · · · ·		
			
· / · · · · · · · · · · · · · · · · · ·			
		nge, reclassification, or cancellation of is	
<u>provis</u>	ions for implementing the amend not applicable, indicate N/A)	ment if not contained in the amendment	itself:
(9)	nos appricable, inalicale 1974)		
		A Control of the Cont	

Page 2 of 3

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 $6(27(1))$
Signature / July / Company
(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)
Michael J Guillory Smith MD
(Typed or printed name of person signing)
President
(Title of person signing)