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Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305) 634-3694 Fax Number : (305)633-9696

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

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ERNESTO GRENIER, M.D., P.A.

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ERNESTO	GRENIER, M.D)., P.A.
DOCUMENT NUMB	ER: P1100002785	5	
The enclosed Articles of	f Amendment and fee are so	bmitted for filing.	
Please return all corresp	ondence concerning this me	tter to the following:	
1	MAX A ADAMS,	ESQ.	
-		Name of Contact Perso	n
•	THE MEDILAW F	İRM	
•		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
;	325 ALMERIA AV	VENUE	•
-		Address	
•	CORAL GABLES	, FLORIDA 331	34
_		City/ State and Zip Cod	ė
ang	ie@themedilawfi	rm.com	
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Angie Perez		_{at} (305	_, 444-3484
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	psyable to the Florids Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Cartificate of Status Certificate Of Status Certified Copy (Additional Copy is enclosed)
	ng Address Idment Section		Address Iment Section

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Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amondment to Articles of Incorporation of

ERNESTO GRENIER, M.D., P.A.	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P11000027855	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	<u>~</u>
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the No
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	330 SW 27TH AVENUE
	SUITE 604
	MIAMI, FLORIDA 33135
C. Enter new ingiling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	330 SW 27TH AVENUE No. 8
	SUITE 604
	MIAMI, FLORIDA 33135
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida 3	weet address)
New Registered Office Address:(Cin	y) (Zip Code)
(សរ្វ	y (Alp Court)
New Registered Agent's Signature, if changing Registered Ager	<u>Dt:</u>
I hereby accept the appointment as registered agent. I am familian	rwun ana accept the obligations of the position.
Signature of New Registered	Agent, if changing

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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 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 John Doe <u>PT</u> Y Mike Jones X Remove X Add SV Sally Smith Type of Action Title: <u>Address</u> Name (Check One) 1) ____Change __ Add __ Remove 2) ____ Change __ Add _ Remove 3) ____ Change ____ Add _ Remove 4) ____ Change _ Add __ Remove 5) ____ Change __ Add Remove Ohange ___ Add __ Всточе

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

P = President: V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief

address of each Officer and/or Director being added:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

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If emending or adding additional Arth (Attach additional sheets, if necessary).	(Be specific)
	,
If an amendment provides for an exchiprovisions for implementing the amen (if not applicable, indicate N/A)	unge, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

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The date of each amendment(s) adoption: NOVEMBER 19, 2012
NOVEMBED 10 2012
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"
(valing 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 NOVEMBER 19, 2012
Signature
(By adirector, president or other officer - if directors or officers have not been
selected, by an insorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
ERNESTO GRENIER
(Typed or printed name of person signing)
DIRECTOR
(Title of person signing)

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