

P110000027873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

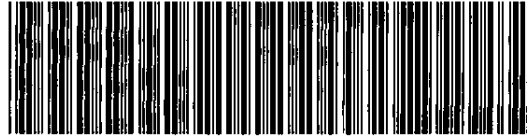
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/16/11--01015--016 **35.00

Amend

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY 16 PM 12:45

FILED

th 523-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Medical Center of Cutler Bay, Inc.

DOCUMENT NUMBER: P11000027873

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Armando Falcon, MD

Name of Contact Person

Medical Center of Cutler Bay, INC

Firm/ Company

10961 SW 186 Street

Address

Miami, FL 33157

City/ State and Zip Code

armandofalcon1@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Armando Falcon

Name of Contact Person

at (305)

252-2228

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

Medical Center of Cutler Bay, Inc.

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

P11000027873

(Document Number of Corporation (if known))

FILED
11 MAY 16 PM 12:45

CLERK OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	Karina Diaz	10961 SW 186 Street Miami, FL 33157	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Armando Falcon	10961 SW 186 Street Miami, FL 33157	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	Armando Falcon, MD	10961 SW 186 Street Miami, FL 33157	<input checked="" type="checkbox"/> Add <input type="checkbox"/> 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 provision for implementing the amendment is that all parties involved vote and agree on any and all changes made pertaining to the Articles and shares. It was voted and agreed that 100 % of shares will now belong to Armando Falcon, MD

The date of each amendment(s) adoption: May 1st, 2011

Effective date if applicable: May 1st, 2011 (date of adoption is required)
(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 May 9, 2011

Signature _____

(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)

Armando Falcon, MD

(Typed or printed name of person signing)

President

(Title of person signing)