P11000071247

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T. LEWIS

COVER LETTER

Division of Corporations NAME OF CORPORATION: Mid South Region, Inc. DOCUMENT NUMBER: P11000071247 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James C. Ramage Name of Contact Person Mid South Region, Inc. Firm/ Company 6151 Lake Osprey Dr., 3rd Floor Sarasota, FL 34240 City/ State and Zip Code curtramage@thesouthernregion.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brian Palmer, CPA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment Articles of Incorporation

FILED

Mid South Region, Inc.

到12 SEP 24 PM 2: 46

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

SECRETARY on or E M

P11000071247	TALLAHASSEE, FLO	
(Document Number of Corporation		
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amend	
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name must contain	
3. Enter new principal office address, if applicable:	6151 Lake Osprey Dr	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	3rd Floor	
	Sarasota, FL 34240	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6151 Lake Osprey Dr	
	3rd Floor	
	Sarasota, FL 34240	
. If amending the registered agent and/or registered office and/or the new registered office add		
Name of New Registered Agent		
(Florid	la street address)	
New Registered Office Address:	, Florida	
	City) (Zip Code)	
lew Registered Agent's Signature, if changing Registered Aghereby accept the appointment as registered agent. I am famil		
A Samuel and a second and a second a second a second as a second a	Annual of the beautiful	
Signature of New Register	red 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)

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

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief 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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		<u>,</u>	-	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
		-		
Add				
Remove				

If amending or adding additional Articology (Attach additional sheets, if necessary).	(Be specific)
•	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) a	doption: <u>September 20, 2012</u>
Effective date <u>if applicable</u> :	
•	(no more than 90 days after amandment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	speed by the mest portions without state model and state model
Dated Septe	mber 29 , 2012
Signature	COL
(By a d selecte	rector, president or other officer — if directors or officers have not been a, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	James C. Ramage
·	(Typed or printed name of person signing)
,	President
	(Title of person signing)