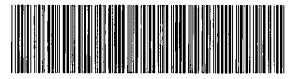
## P13000028211

(Requ	estor's Name)	
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(Docu-	ment Number)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: LISA J. LEARN, I	D.O., PA	
DOCUMENT NUMI	BER: P13000028211		<del></del> -
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	LAURA STREIMER		
	<del></del>	Name of Contact Person	n
	STREIMER & FLUSBERG,	PA	
		Firm/ Company	
	12540 W ATLANTIC BLVI	• -	
		Address	
	CORAL SPRINGS, FL 3307	'1	
		City/ State and Zip Cod	c
DRL	EARN@DRLISALEARN.CC	)M	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call: 954 at (	846-1100
Name o	of Contact Person		de & Daytime Telephone Number
	r the following amount made		
■ \$35 Filing Fee	□S43.75 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)
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

LISA J. LEARN, D.O., PA	~ · · · · .	<u> </u>
	rrently filed with the Florida Dept. of State)	7 - 17: 52
P13000028211		<u></u>
(Document Nun	nber of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corporation	on:	
FORT LAUDERDALE PLASTIC SURGERY, INC.		The new
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevia	" or "Co". A professional corporation name mu	abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		<del></del>
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		
N/A	auress:	
Name of New Registered Agent	<del></del>	
	ida street address)	
New Registered Office Address: N/A	, Florida,	
	(City) (Z	ip Code)
Now Begistered Amenta Signature if the end Decision d		
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	Agent: ulliar with and accept the obligations of the positio	n.
<del></del> -		
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)

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 <math>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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change	_	N/A	
Add			
Remove			
3 ) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
		N/A	
6) Change		IVA	
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
	<del></del>
<del></del>	
<del></del>	· · · · · · · · · · · · · · · · · · ·
<u> </u>	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
N/A	
<del></del>	

N <sub>1</sub>	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
N/A	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Note: If the date inserted in this block does not document's effective date on the Department of	t meet the applicable statutory filing requirements, this date will not be listed as the tate's records.
Adoption of Amendment(s) (CH	CK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	nareholders. The number of votes cast for the amendment(s) proval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	ment(s) was/were sufficient for approval
by(vo.	n
(vo.	lg group)
☐ The amendment(s) was/were adopted by the action was not required.	oard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	corporators without shareholder action and shareholder
Dated 8/15/200	93
	ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
LISA J LE	RN
	yped or printed name of person signing)
PRESIDEN	
	(Title of person signing)