# P13000062266

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DATE: 7/26/18

NAME:

ERNESTO R MONTESINO VARGAS MD PA

TYPE OF FILING: AMENDMENT

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ERNESTO R MO	NTESINO VARGAS MD	PA
	BER: P13000062266		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	CONCETTA R LUPARDO		
		Name of Contact Person	1
CONCETTA R LUPARDO CPA			
		Firm/ Company	
	1751 AVENIDA DEL SOL		
		Address	
	BOCA RATON FL 33432		
	<del></del>	City/ State and Zip Cod	e
CON	CETTA@LUPARDOCPA.C	COM	
	_	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas		<b>692-1350</b>
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
	r the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Div P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

ERNESTO R MONTESINO VARGAS	MD PA		
(Name o	f Corporation as currently file	d with the Florida Dept. of State)	<del></del>
P13000062266			
	(Document Number of Con	poration (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flor</i>	ide Prosit Corporation adopts the followin	g amendment(a) t
A. If amending name, enter the new na	me of the corporation;		
ERNESTO R MONTESINO MD PA		u	The new
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co" tion," or the abbreviation "P.A	"company," or "incorporated" or the a  . A professional corporation name must "	bbreviation contain the
B. Enter new principal office address, (Principal office address MUST BE AS	<u>if applicable:</u> TRBBT ADDRESS )		
C. Enter new mailing address, if applied (Mailing address MAY BE A POST)  D. If amending the registered agent as new registered agent and/or the new registered agent	OFFICE BOX)		
Name of New Registered Agent	ERNESTO R MONTESINO	· · · · · · · · · · · · · · · · · · ·	
	6238 W ATLANTIC AVE SI	JITE 2	
	(Florida street	aidress)	<b></b>
New Registered Office Address:	DELRAY BEACH	33484 Florida, Florida	
The state of the s	(Cit	n); (ZLp	Code)
New Registered Agent's Signature. If a I hereby accept the appointment as regis	tered agept. I am familiar with	and accept the obligations of the position.  Istered Agent, if changing	-

Page 1 of 4

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
X Change	DP	ERNESTO R MONTESINO	6238 W ATLANTIC AVE #2
Add			DELRAY BEACH FL 33484
Remove			
2) Change			
Add			
Remove			
3 ) Change	<del></del>	<del></del>	
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
()			
6) Change	<del></del>	sams residents	
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
- 11-2	4-44
f an amendment provides for an eych provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	the toward in the amendment (1961)
J	

7/26/2018	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	,
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records.	vill not be listed as the
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	
δy	
by	
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.	
07/26/2018	
Deted	
Signature	
(By a director, president or other officer - if directors or officers have not been	<del>, - ,</del>
selected, by an incorporator - if in the hands of a receiver, trustes, or other court	
appointed fiduciary by that fiduciary)	
ERNESTO R MONTESINO	
(Typed or printed name of person signing)	<del></del>
DP	
(Title of person signing)	<del></del>

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