P14000043919

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	: #)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Accountants and Consultants

Brian D. Baratz, CPA • Mark H. Wander, CPA*^{+∞}° • Raymond M. Giunta, CPA*
Clifford Simmons, CPA^E • Francis M. Mulroy, CPA • John R. Fekete, CPA • Richard Dougherty, CPA^E

*Accredited in Business Valuations – *Personal Financial Specialist – [∞]Certified in Financial Forensics

*Accredited Estate Planner – [£]Certified Valuation Analyst

November 30, 2015

Elise Nocella First Medical Management Group Inc. 285 Mount Laurel Road Mount Laurel, NJ 08054-9554

RE:

Florida Department of State Division of Corporations Form CR2E011, Articles of Amendment

Dear Elise,

Enclosed is Form CR2E011, Articles of Amendment, required to add Christopher Ryan Herting as a 50% shareholder in First Medical Management Group Inc. effective October 31, 2015. Please sign and date the form where indicated and include a check made payable to "Florida Department of State" in the amount of \$35.

Mail the check and the signed form to the following address:

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

Should you have any questions, please do not hesitate to contact our office.

Very truly yours,

BARATZ & ASSOCIATES, P.A.

RY

Raymond M. Glunta, CPA giuntar@baratzepa.com

RMG/cv/dlh

Enclosure

CT: FirstMedicalManagementFormCR2E011113015

4028

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: FIRST MEDICAL	MANAGEMENT GROUP	PINC.
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this made	tter to the following:	
	Elise Nocella		
		Name of Contact Persor	1
		Firm/ Company	
	285 Mt. Laurel Road		
		Address	
	Mt. Laurel, NJ 08054		
		City/ State and Zip Code	e
noce	ella2012elise@aol.com		
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Elise Nocella		at (609	668-2316
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 14, 2015

Elise Nocella 285 Mt. Laurel Road Mt. Laurel, NJ 08054

SUBJECT: FIRST MEDICAL MANAGEMENT GROUP INC.

Ref. Number: P14000043919

We have received your document for FIRST MEDICAL MANAGEMENT GROUP INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 115A00026098

Articles of Amendment to Articles of Incorporation of

FIRST MEDICAL MANAGEMENT GROUP INC.

(Name of Corporation	on as currently filed with the Florida DEpf[5fState] PM 4: 25
P14000043919	SECUETATION
(Docum	nent Number of Corporation (if knownTALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	prporation:
	The new cd "corporation," "company," or "incorporated" or the abbreviation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable	<u> </u>
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS)
C. Enter new mailing address, if applicable:	NV.
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>
	
D. If amending the registered agent and/or register	
new registered agent and/or the new registered	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	zistered Agent:
	I am familiar with and accept the obligations of the position.
Sign	nature 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 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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	COO	Ryan Christopher Herting	
Add		0	
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
A) (7)			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
We are amending Article V of the original articles of incorporation. We are adding Christopher Ryan Herting as a 5	0%
shareholder to the corporation. Christopher Ryan Herting resides at 24 Seabreeze Lane, Avalon, NJ 08202.	
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 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 requiremen document's effective date on the Department of State's records.	ts, this date will 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 am by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required.	hareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	holder
Dated 12/7/2014 Signature The World	
(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)	
Elise Nocella	
(Typed or printed name of person signing)	
President	
(Title of person cigning)	