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TO: Amendment Section

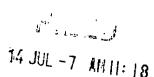
Division of Corporations NAME OF CORPORATION: Natalia Vilate M.D. P.A. DOCUMENT NUMBER: P14000054337 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Natalia Villate Name of Contact Person Firm/ Company 4001 N. Ocean Drive, B704 Address Boca Raton, Florida 33431 City/ State and Zip Code nv@nataliavillate.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Natalia Villate 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 is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Natalia Vilate M.D. P.A.

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

P14000054337

dment(s) to

(Document Number	r of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this <i>Flor</i>	ida Profit Corporation ado	pts the following amendme
A. If amending name, enter the new name of the	e corporation:		
Natalia Villate M.D. P.A.			m:
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or	orp," "lnc," or "Co".	A professional corporati	The new nted" or the abbreviation on name must contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)		
	_		
D. If amount discount is a second or a few second			
 If amending the registered agent and/or registered agent and/or the new register 		n Florida, enter the name	of the
Name of New Registered Agent			
	(Florida street ac	ldress)	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing F	Registered Agent:		
hereby accept the appointment as registered agen	t. I am familiar with a	nd accept the obligations o	f 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)

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	PT	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			
Add Remove			
2) Change		_	
Add Remove			
3) Change			
Add Remove			
4) Change	·····		
Add Remove			
5) Change			<u>.</u>
Add			
Remove			
6) Change			
Remove			

	g additional Artic ets, if necessary).	(Be specific)				
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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)	
·		
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.	
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amer	ndment(s) was/were sufficient for approval	
hy	ting group)	
(vot	ting group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
Dated07/02/	114	
Signature 1	e Ullety_	_
	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court by by that fiduciary)	
Natalia V	/illate	
	(Typed or printed name of person signing)	
Presiden	nt	_
	(Title of person signing)	