P14000055879

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	,	
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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	F. O.	
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT		D FRANCHISE G 879	ROUP INC.		
The enclosed Articles of A	mendment and fee are su	bmitted for filing.			
Please return all correspon	dence concerning this ma	tter to the following:			
JE	ERRY THEO	PHILOPOULC Name of Contact Person			
LAW FIRM OF LARRY CROW, P.A.					
Firm/ Company 1247 SOUTH PINELLAS AVE.					
. <u>T</u> /	TARPON SPRINGS, FL 34689				
		City/ State and Zip Code			
jtlaw@tampabay.rr.com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Jerry Theophilopoulos at (727) 945-1112 Name of Contact Person Area Code & Daytime Telephone Number					
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the	following amount made	payable to the Florida Depa	rtment of State:		
S35 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)		
	Address		Address		

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**



SHARPS MD FRANCHISE GROUP INC.

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

nent(s) to

P14000055879			
(Document Number of	Corporation (if know	1)	
Pursuant to the provisions of section 607.1006, Floridatits Articles of Incorporation:	a Statutes, this <i>Florida</i>	Profit Corporation	adopts the following amendm
A. If amending name, enter the new name of the co	orporation:		
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the	," "Inc," or "Co". .	ompany," or "incor A professional corpo	The ne porated" or the abbreviation pration name must contain th
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered		Florida, enter the n	ame of the
Name of New Registered Agent			_
			<u> </u>
	(Florida street addr	ess)	
New Registered Office Address:	(City)	, Floric	la (Zip Code)
	(Cily)	·	(Esp Couc)
New Registered Agent's Signature, if changing Reg	istered Agent:		
I hereby accept the appointment as registered agent.		d accept the obligation	ons of the position.
			_
Cinnature of Ma	un Besistanad Assat i	fakanaina	

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 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	Р	Basile Pertsas	1810 South Pinellas Ave.		
Add			Tarpon Springs, FL 34689		
Remove					
2) Change	Р	Gerald Hubbell	1810 South Pinellas Ave.		
Add			Suite L		
Remove			Tarpon Springs, FL 34689		
3) Change	VP	Jerry Theophilopoulos	1247 South Pinellas Ave.		
Add			Tarpon Springs, FL 34689		
Remove					
4) Change	T	Robert Symanski	309 N. Belcher Rd.		
Add			Clearwater, FL 33765		
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					
i i kemove					

E. <u>If an</u> Attae	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
N/A	
,	
•	
<u>pro</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
I/A	

The date of each amendment(s) adoption date this document was signed.	n: NOVEMBER 1, 2014	SECRETARY OIVISION OF CO	'NESTATE	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days afte	14 NOV -6 er amendment file d		
		-		
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficien		f votes cast for the	amendment(s)	
The amendment(s) was/were approved must be separately provided for each was a separate				
	amendment(s) was/were sufficien	• •		
by	(voting group)	.,,		
	(voting group)			
The amendment(s) was/were adopted b action was not required.	y the board of directors without sh	nareholder action ar	nd shareholder	
The amendment(s) was/were adopted b	v the incorporators without shareh	older action and sh	areholder	
action was not required.	2)	order detroit und bit		
NOVENDED	Para			
Dated NOVEMBER	4,/2014 -/-			
7-11	4			
Signature	/	~~ .		
	president or other officer – if dir n incorporator – if in the hands of			
	uciary by that fiduciary)	a receiver, trustee,	or other court	
GER	ALD HUBBELL			
	(Typed or printed nan	ne of person signing	g)	_
PRE	SIDENT			
	(Title of perso	on signing)		