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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ASHOK TYAGIN	MD PA	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	AMEET A PUNWANI		
		Name of Contact Person	11
	PROFITS AND GAINS LLC		
		Firm/ Company	
	2607 WINDGUARD CIR ST	ΓΕ 101	
	· ·	Address	
	WESLEY CHAPEL FL 3354	14	
		City/ State and Zip Cod	e
AME	EET@PROFITSANDGAINS.	СОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call: at (3863144
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
	or the following amount made		,
■ \$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee. FL 32314	Amend 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

SECRETARY OF STATE DIVISION OF CORPORATION: 2017 MAR 16 AM 12: 25

ASHOK TYAGI MD PA

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amits Articles of Incorporation: A. If amending name, enter the new name of the corporation: ASHOK TYAGI DO PA The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbrev "Corp" "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co", A professional corporation name must contaword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable:	viation ain the
	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	
(City) (Zip Code))
Nam Dagiotanad Agant's Signature if shanging Dagistanad Agants	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of 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 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>	<u>Addres</u> s
1) Change			<u> </u>
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			J
Remove			· ·
4) Change			
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5) Change			
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6) Change			
Add			
Remove			

Attach additional sheets, if necess	ary). (Be spec	vific)			
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an amendment provides for an organization of implementing the (if not applicable, indicate A	<u>e amendment it</u>	lassification, or	r cancellation of in the amendme	issued shares, int itself:	
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The face of the second	Se advantable de
The date of each amendment(s) and date this document was signed.	
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
03/13/17	
Dated	
selected	rector, president of other officer - If directors or officers have not been l. by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	ASHOK TYAGI
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)