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JUN 0 8 2017 S. YOUNG

## COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: JOSE R Soler MD PA  DOCUMENT NUMBER: P17000032491
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Name of Contact Person  Pincheusky & Mofsen  Firm/ Company  5541 N University Da # 103  Address  Coral Springs FC 27067  City/ State and Zip Code  Demost @ Mindspring . Com  E-mail address: (to be used for future/annual report notification)
For further information concerning this matter, please call:
HOWARD MERSEN at ( 754 ), 753-3545  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

## Articles of Incorporation

JOSE R SOLER MD PA

(Name of Corporation as currently filed with the Florida Dept. of State) P17000032471
(Document Number of Corporation (if known)

. If amending name, enter the new name of the corpora		The nexe
Memory the distinguishable and contain the word "co Corp.," "Inc.," or Co.," or the designation "Corp," "In ord "chartered," "professional association," or the abbre	ic." or "Co". A professional corpo	porated" or the abbreviation ration name must contain the
Enter new principal office address, if applicable:	~/.1	
Principal office address MUST BE A STREET ADDRES.	<u>S</u> )	in miles
	****	3.5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered of new registered agent and/or the new registered office		ime of the
Name of New Registered Agent	,	
	lorida sircei address)	
New Registered Office Address:		_, Florida
	(C.Hv)	/Zip Code)

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

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 Doc	
X Remove	$\overline{\lambda}$	Mike Jones	
<u>X</u> Add	<u> </u>	Sally Smith	
Type of Action (Check One)  1) Change Add Remove	Title	Name  JUSE R. SOLER	SS41 N University DR #103 Corol Spring: FL 33067
2) Change Add			
Remove 3 ) Change Add Remove			
d) Change Add Remove			
5) Change Add			
Remove  6) Change Add			
Remove			

Itach <i>additional sheets, if nece</i>	rssary). – (Be specific	c)		
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an amendment provides for	an exchange, reclas	sification, or cancel	lation of issued shar	25,
rovisions for implementing (if not applicable, indicate	<u>the amendment if no</u>	it contained in the a	imendment itseii:	
(у та арупсате, такас	1571)	. 15.		
		11/1		
<del></del>				· · · · · · · · · · · · · · · · · · ·
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The date of each amendment(s) adoption: _	6-2-	17		if other than the
date this document was signed.			,	
Effective date if applicable:	6-7-	17	ent file date)	<del></del>
	(no more than	90 days after amendm	ent file date)	
Note: If the date inserted in this block does document's effective date on the Department of		licable statutory filing	requirements, this date will not	be listed as the
Adoption of Amendment(s) (C	HECK ONE)			
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		he number of votes cas	t for the amendment(s)	
☐ The amendment(s) was/were approved by t must be separately provided for each votin				
"The number of votes cast for the am	endment(s) was/wo	ere sufficient for appro	val	
by			·	
(Vo	oting group)			
☐ The amendment(s) was/were adopted by the action was not required.	e board of director	rs without shareholder	action and shareholder	
The amendment(s) was/were adopted by the action was not required	e incorporators wi	thout shareholder actio	on and shareholder	
Dated6-2-	7	<del></del>		
Signature (By a director, pro				
		licer - if directors or o		
selected, by an in- appointed fiducia	•		trustee, or other court	
4	COLJAND	MOFSEN		
	(Typed or printed	d name of person signi-	ng)	
/1	Corporato	, R e of person signing)		
	7 (Title	e of person signing)		_