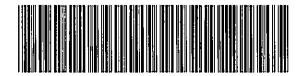


(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

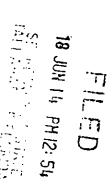
Office Use Only



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JUN 15 2018



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	Doctor Me	edical Group	Corps.
DOCUMENT NUMBE	er: <u>P18080</u>	017611		'
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	Richard My Docto 6822 W W Tango,	Name of Contact Person Medical Firm/ Company Address FL 33634 City/ State and Zip Cod	Group Corp	
_~	y doctorned fi-mail address: (to be us	lical group (seed for futury annual peport	a gmail com	
For further information	concerning this matter, pleas	se call:		
Richard Name of	Moralla Contact Person	at (<u>81 3</u> Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	
<u>Maili</u>	ng Address	Street	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

FILED

Afteres of the	•
m. Destar madical	18 JUN 14 PM 12: 54
(Name of Corporation as currently	ly filed with the Florida Dept. of State)
(Name of Corporation as Current	ALLASA E ELORIDA
P180000170	6.1.
(Document Number of	f Corporation (if known)
cursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s):
a. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " vord "chartered," "professional association," or the abbreviation "	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
). If amending the registered agent and/or registered office addi	
new registered agent and/or the new registered office address	<u>:</u>
Name of New Registered Agent Richard	Whales
6827 W V	Vaters Ave
New Registered Office Address:	City) . Florida 3.3634.
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	
. , , ,	and the second s
A STATE OF THE STA	
Signature of New B	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	PT John D	Doe	
X Remove	V Mike J	dones .	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	_p_	Richard Morales	6822 W Waters
_ X _ Add			Ave Tampa, FL
Remove			33634
2) Change	_D_	Orlando Perez	6822 W Water
Add		0	Ave Tampa, FL
Remove			33634
3) Change	VP	Odenia Galvez	6812 W Waters
Add		ų v	Ave Tempa, FL
Remove			_3.36.34
4) Change	_S	Osnier Perez	6822 W Waters
$\underline{\lambda}$ Add		0	Ave Tampa, FL
Remove			33634
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).				
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		<u>-</u>		
 			<u> </u>	
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				 .
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification,	or cancellation of is	sued shares, t itself:	
(if not applicable, indicate N/A)				
	.			
				
			··	

The date of each amendment(s) ado date this document was signed.	otion:, if other than the
_	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement sich voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	the amendment(s) was/were sufficient for approval
by	(voting group)
	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder
Dated	-13-18 (July .
(By a dire	ctor, president or other officer - if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
_	()12/40do Péres
	(Typed or printed name of person signing)
	DB
_	(Title of person signing)