12/18/2018

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Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SPRINGER ANESTHESIA, INC.

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TO: Amendment Section Division of Corporations

COVER LETTER

NAME OF COURSE	ATION: SPRINGER ANE	STHESIA INC.	
		21112311, 1113.	
DOCUMENT NUMB	ER: P18000093175		
The enclosed Articles	of Amendment and for ore su	builted for filing,	
Please return all corres	pondence concerning this ma	tter to the following:	
	Cheyenne Moseley		
		Name of Contact Person	1
	LegalZoom.com, Inc.		
,		Firm/ Company	
	101 N. Brand Blvd., 11th F	loor	
•		Address	
	Glendale, CA 91203		
•		City/ State and Zip Cod	:
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	E-mail address, (to be as	ed for future annual report	notification)
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For further information	r concerning this matter, pleas	ie call:	
Cheyenne Moseley		at (800	, 773-0888 ext. 9724
Name (if Contact Person	Area Co	773-0888 ext. 9724 de & Dayrime Telephone Number
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thrainsed is a check to	r the following amount made p	зауаете то тне стогнав цюра	irment of State.
S35 Filing Foc	□\$43.75 Filing Fee & Certificate of Status	✓\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐SS2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
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Amendment Section		Amenément Section	
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314			industry Center Circle

Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation οſ

2019 JAN -2 AM II: 13

SPRINGER ANESTHESIA INC

SECRETARY OF STATE

ು	FRINGER ANEST RESIA. 1116.	\overline{A}_{A}
(Name of Cornoration as correctly	v filed with the Florida Dent. of State)	TALLAHASSEE, FL
	P18000093175	
(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607.1006. Flor Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corpor</i> e	ation adopts the following amendment(s
If amending name, enter the new name of the	corporation:	
		The new
ame must be distinguishable and contain the w Carp., ""Inn.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc." or "Co". A profussional o	Incorporated" or the abbreviation corporation name must contain the
Enter new principal office address, if applica Principal office address <u>AUST BE A STREET A</u>	DDRESS)	
. Enter new malling address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
. If amending the registered agent and/or reals new registered agent and/or the new register	stered office address in Florida, enter t ed office address:	the name of the
Name of New Registered Agem		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	Florida(Zip Cade)
iew Registered Agent's Signature, if changing be hereby accept the appointment as registered agen		lgations of the position.
Signature of	New Registered Agent, if changing	

Example:

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 officeridirector title by the first latter of the office title;

P = Prusident; 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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Salty Smith, SV as an Add.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	PD	Gina Springer	7553 Presidium Loop
Add			Galena, OH 43021
Remove			
2) Change	TS	Craig Springer	7553 Presidium Loop
X Add			Galene, QH 43021
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Page 2 of 4

were additioned solvers, ly need sources.	(Be specific)
<u></u>	
. · · · · · · · · · · · · · · · · · · ·	
fon amendment amplides for an assistant	names, reclassification, or cancellation of issued shares.
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame-	ndment if not contained in the amendment itself:
provisions for implementing the ame-	ndment if not contained in the amendment itself:
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provisions for implementing the ame-	ndment if not contained in the amendment itself:

The date of each amendment(s) ad	option: 12/4/2018	if other than the
date this document was signed.		
Effective date if nonlicable:		-
	(no mure than 91) days after omendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were odo by the shareholders was/were su	pied by the shareholders. The number of votes cast for the amendment(s) Ricient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vide separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	T-	
	(voting group)	
The amendment(s) was/were add 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	
Dated 12	11/2018	
Signature	250 ringer	=
(By a di	irecol president or other officer — if directors or officers have not been the transfer of the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	Gina Springer	
	(Typed or printed name of person signing)	_
	(1) her or human mine at hersen alternot.	
	President	_
	(Title of person signing)	