P21 00000 38448

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	∋ #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
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C. BRUMBLEY
JAN - 5 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	NAT	ALIA SOLENKO	OVA MD.	, PA		
DOCUMENT NUMBER:						
The enclosed Articles of Amend	<i>ment</i> and fee are su	bmitted for filing				
Please return all correspondence	concerning this ma	tter to the followi	ng:			
		JAIME L. P.	ARLADE			
	,	Name of Cont	act Person	1		
	PARLADE, SCHAEFER, AND SCHORTZ					
	Firm/ Company					
	5975 SUNSET DRIVE, SUITE 802					
·		Addre	ess	,		
		MIAMI, FL	33143			
	<u> </u>	City/ State and	l Zip Code	<u> </u>		
	4	ACCOUNTING@	DPSSCPA	S.COM		
E-ma	nil address: (to be us	-	-			
For further information concerni			305	670 - 0400		
Name of Contact	Person	art	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the follo	wing amount made	payable to the Flo	orida Depa	artment of State:		
	3.75 Filing Fee & rtificate of Status	S43.75 Filin Certified Cop (Additional copenclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

 \mathbf{of}

NATALIA SOLENKOVA MD. PA

(<u>Name of Cort</u>	P21000038448	orida Dept. or State,	,	
(1	Document Number of Corporation (if kn	own)		
Pursuant to the provisions of section 607,1006, I its Articles of Incorporation:	Florida Statutes, this Florida Profit Corp.	poration adopts the f	ollowing amendr	nent(s) to
A. If amending name, enter the new name of	the corporation:			
name must be distinguishable and contain the wo "Inc" or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corp	rporated" or the abb poration name must	The ne previation "Corp. contain the wo	
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)			202	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			DEC 14 AH II: 0	FILED
D. If amending the registered agent and/or renew registered agent and/or the new regis	tered office address:	er the name of the		-
Name of New Registered Agent	JAIME L. PARLADE			
	5975 SUNSET DRIVE, SUITE 80	2		
	(Florida street address) SOUTH MIAMI		22112	
New Registered Office Address:	/City)	Florida_	33143 (Zip Code)	-
New Registered Agent's Signature, if changing I hereby accept the appointment as registered by	g Registered Agent: gent. Cam familiar with approaccept the Signature of New Registered Agent, if o		osition.	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>			
\underline{X} Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Sn	<u>rith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s		
1) Change		_				
Add						
Remove						
2) Change		_				
Add						
Remove 3) Change						
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change		_				
Add						
Remove						

(Attach additional s	Iding additional Artic sheets, if necessary).	(Be specific)	<u> </u>			
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provisions for in	provides for an exchiplementing the amer	ange, reclassifica idment if not con	tion, or cancella itained in the am	tion of issued sha iendment itself:	ires.	
(if not applica	able, indicate N/A)					
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	otion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this blocdocument's effective date on the Department.		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of direc	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of vicient for approval.	rotes cast for the amendment(s)
	ved by the shareholders through voting g ch voting group entitled to vote separate	
"The number of votes east fo	the amendment(s) was/were sufficient f	or approval
by		
,	(voting group)	
Signature (By a dire selected.	2 2021 ctor, president or other officer – if director of an incorporator – if in the hands of a refiduciary by that fiduciary) NATALIA SOLEN	RKOVA
	,	
_	DIRECTOR	<u> </u>
	(Title of person signing)	

. . .