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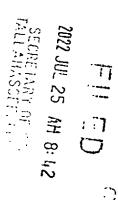
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: MANUEL M GONZALEZ MD PA DOCUMENT NUMBER: P22000054911 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ydia Tapia Name of Contact Person Ares & Company Firm/ Company 3636 NW 87 Avenue Address Miami, FL 33165 City/ State and Zip Code info@arescpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 539-7360

Area Code & Daytime Telephone Number Manel Gonzalez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation \mathbf{of}

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Manuel M Gonzalez MD PA

(Name of Corporation as currently filed with the Florida Dept. of State)

P22000054911

nt(s) to

(Document Number	r of Corporation (if known)	~
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is <i>Florida Profit Corporation</i> ado	pts the following amendme
A. If amending name, enter the new name of the corporation:		
Manuel Marcelo Gonzalez MD PA		The nev
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.2"	A professional corporation nar	r the abbreviation "Corp.,
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/a	
Transparighte dudiess <u>brost be A STREET ADDRESS</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office agent new registered agent and/or the new registered office address. N/A		e of the
Name of New Registered Agent		
(Florida	strect address)	
New Registered Office Address:	, i	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent.—I am familia		of the position.
Signature of New	Registered Agent, if changing	
ingitiatic of New	regarded Agent, if Changing	

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 De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>SV</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove 3.) Change		_		
Add				
Remove				
4) Change		···		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
VA
If any and any description of the second allows
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
A
<u></u>

•

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	ULY 19, 2022	
Effective date if applicable:		
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in the document's effective date on the		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of direc	etors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of vestificient for approval.	otes east for the amendment(s)
	approved by the shareholders through voting g for each voting group entitled to vote separate	
"The number of votes of	ast for the amendment(s) was/were sufficient f	or approval
by		,"
,	(voting group)	
sele	a director, president or other officer – if directored, by an incorporator – if in the hands of a rointed fiduciary by that fiduciary)	
	MANUEL M GONZALEZ	
	(Typed or printed name of person	on signing)
	PD	
	(Title of person signing)	