## P2300030739

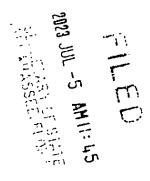
	(Requestor's Name)
	(Address)
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· · ·	(City/State/Zip/Phone #)
	(City/State/Zip/Filone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
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Special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

Office Use Only



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 $\mathcal{C}_{\mathcal{D}}$ 

A. RAMSEY JUL -6 2023

FLORIDA CAPITAL COURIER SERVICES,	INC
2330 CLARE DRIVE	
TALLAHASSEE, FL 32309	
(850) 524–5437	
(850) 524–6243	
Please use funds from this accoun	
Authorization Signature:	while:
D & G MEDICAL GROUP INC	P23000030739
BUSINESS NAME	DOCUMENT #
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Corp Not for Profit Limited Liability Domestication Other LCORP LLLP	X_Amendment  Resignation of R.A. Officer/Dir Change of Registered Agent Revocation of Dissolution Merger Articles of Conversion Amended and restated Articles Statement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: D+G Medical GROUP INC				
DOCUMENT NUMBER: P23 0000 30739				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Michael MAJOR				
Name of Contact Person				
D&G Medical GROUP INC Firm/Company				
15500 ROOSEVELT BIVD SNITE 104				
Address				
Clearwater, Florida 33760 City/State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future amual report notification)				
E-mail address: (to be used for future amual report notification)				
For further information concerning this matter, please call:				
Michael MAJOR at 727 8515483				
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  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is enclosed)				

Mailing Address
Amendment Section

P.O. Box 6327

Division of Corporations

Street Address
Amendment Section

Division of Corporations

The Centre of Tallahassee

## Articles of Amendment

FILED

**Articles of Incorporation** 

T E / M V	of	_		3 JUL -5	AH II. 40
D & G Medi	cal Gr	000	TNC	<u>_ ,, _, , ; ; } </u>	CESTAL.
(Name of Corpora	ition as currently I	iled with the	Florida Dep	t. of State);	EE. W.
	000030				
(Docu	ument Number of C	Corporation (if	known)		
ursuant to the provisions of section 607.1006, Flories Articles of Incorporation:	da Statutes, this Flo	orida Profit C	<i>Corporation</i> a	dopts the fol	llowing amendment
. If amending name, enter the new name of the	corporation:				
					The new
ame must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "Inc chartered," "professional association," or the abbi	c," or "Co". A p				
Enter new principal office address, if applicab				<u>-</u>	
Principal office address <u>MUST BE A STREET AD</u>	DDRESS )				
Enter new mailing address, if applicable:	- A10				
(Mailing address MAY BE A POST OFFICE B	<u>(UX</u> )			<del></del> -	,
	-		<u></u>		
			4.5	<b>*</b> 43	-
<ul> <li>If amending the registered agent and/or registened new registered agent and/or the new registered</li> </ul>		s in Florida,	enter the nai	ne of the	
Name of New Registered Agent					<del></del>
	(FI)	- 14			
	(Florida street	aaaress)			
New Registered Office Address:	(6:			, Florida	(Zip Code)
	(Ci	9)			(Zip Code)
ew Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.	egistered Agent: I am familiar with	and accept to	he obligation	s of the posi	tion.
Sign	nature of New Regi	stered Agent,	if changing		<del></del>
heck if annlicable					

<sup>☐</sup> 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)

Remove

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.

Mike Jones, V as Remo	ve, and Sall	y Smith, SV as an Add.	
Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	MGR	Estee Waters	15500 Roosevelt BIW Smite 101
Add			clearwater, FL 33760
X Remove			
2) Change			
Add			
Remove Change	<del> </del>		
Add			
Remove			
4) Change			
Add		,	
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			

	(Be specific)	
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en amendment provides for an exc	hange reclassification or cancellation of issued shares,	
an amendment provides for an exc	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	
rovisions for implementing the amo	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	
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rovisions for implementing the amo	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file d	late)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirer tment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte action was not required.	1 by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the tent for approval.	amendment(s)
	ed by the shareholders through voting groups. The follow the voting group entitled to vote separately on the amend	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	or, president or other officer - if directors or officers ha	
	an incorporator – if in the hands of a receiver, trustee, iduciary by that fiduciary)	or other court
appointed i	Mike MAJOL	
	(Typed or printed name of person signing)	
	CEO	
<del></del>	(Title of person signing)	