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2023 JUN 29 AM 9: 57

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A. RAMSEY
JUN 3 0 2023

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: RODOLFO DUM	ENIGO, M.D., P.A.			
DOCUMENT N	P95000067855				
The enclosed A	rticles of Amendment and fee are st	ubmitted for filing.			
Please return all	correspondence concerning this ma	atter to the following:			
	Paul McBride				
		Name of Contact Person	1		
	Rodolfo Dumenigo MD PA				
		Firm/ Company			
	1400 NW 107th AVE Suite	500			
	· · · · · · · · · · · · · · · · · · ·	Address			
	Miami, Florida 33172				
		City/ State and Zip Code	c		
	Brenda.Lezama@clinicalcaremc.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further infor	mation concerning this matter, plea	ise call:			
Brenda Lezama	ı	786	690-1933		
· ·	Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a ch	eck for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing F	ee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

## Articles of Amendment to **Articles of Incorporation**

FILED

RODOLFO DUMENIGO M.D. P.A.

2023 JUN 29 AM 9: 57

P95000067855  (Doc Pursuant to the provisions of section 607.1006, Florats Articles of Incorporation:  A. If amending name, enter the new name of the name must be distinguishable and contain the word	ument Number of Cida Statutes, this Fi	The new	
P95000067855  (Doc Pursuant to the provisions of section 607.1006, Florats Articles of Incorporation:  A. If amending name, enter the new name of the name must be distinguishable and contain the word	ument Number of Cida Statutes, this Fi	Corporation (if known)  **Portion adopts the following amendment(s)	
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:  A. If amending name, enter the new name of the name must be distinguishable and contain the word.	ida Statutes, this Fl	Torida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new name of the	corporation:		
ame must be distinguishable and contain the word		The new	
	'corporation'''''co	The new	
	'corporation " "co		
chartered," "professional association," or the abl	c." or "Co". A	mpany," or "incorporated" or the abbreviation "Corp" professional corporation name must contain the word	
Enter new principal office address, if applicable:		Paul McBride	
Principal office address <u>MUST BE A STREET A</u> i		1400 NW 107th AVE Suite 500	
		Miami, Florida 33172	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1400 NW 107th AVE Suite 500	
		Miami, Florida 33172	
D. If amending the registered agent and/or registered agent and/or the new registered		ss in Florida, enter the name of the	
Name of New Registered Agent Paul McBride			
1400 NW	1400 NW 107th AVE Suite 500		
	(Florida stree	t address)	
Miami		33172	
New Registered Office Address:		, Florida	

☐ 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)

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Paul McBride	1400 NW 107TH AVE
X Add		_	SUITE 500
Remove			MIAMI, FL 33172
2) Change	COO	Christine Hunsen	1400 NW 107TH AVE
X Add		_	SUITE 500
Remove 3) Change		_	MIAMI, FL 33172
Add			
Remove			
4) Change	<del></del>		
Add			<u>,</u>
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

	r adding additional Amul sheets, if necessary)	). (Be specific)	<u></u> :		
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	<del> </del>				
If an amende	ent provides for an ex	change reclassific	estion or cancellar	tion of issued sha	ros
provisions fe	r implementing the an	nendment if not co	ntained in the am	endment itself:	5.5.11
(if not ap	olicable, indicate N/A)				
		<del>- • • • • • • • • • • • • • • • • • • •</del>			
<del></del>					

	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file	
	(no more than 90 days after amendment file	date)
<b>Note:</b> If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirepartment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
X) The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the filter of the shareholders.	he amendment(s)
	proved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amer	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated_6/29/202	pousigned by:	
	ul M. McBride, 11	
Signature 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HELTER: FILES dent or other officer – if directors or officers	have not been
selecte	d, by an incorporator – if in the hands of a receiver, truste	
appoin	ted fiduciary by that fiduciary)	
	Paul McBride	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	