

Division of Corporations

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P95000074643

Florida Department of State
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BASIC AMENDMENT

ADAM M. ROSEN, M.D. P.A.

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ALAN S GASSMAN PA

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 8, 1999

ADAM M. ROSEN, M.D. P.A.
1106 DRUID ROAD S., SUITE 204
CLEARWATER, FL 34616

SUBJECT: ADAM M. ROSEN, M.D. P.A.
REF: P95000074643

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Darlene Connell
Corporate Specialist

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ARTICLES OF AMENDMENT OF
ADAM M. ROSEN, M.D. P.A.

THE UNDERSIGNED, ALAN S. GASSMAN, being the Vice President and Assistant Secretary, of ADAM M. ROSEN, M.D. P.A., does hereby certify that the following Amendment to the Articles of Incorporation of ADAM M. ROSEN, M.D. P.A. was approved by the Stockholders of said Corporation on the 7th day of June, 1999, at a duly called meeting of the Stockholders and Directors of the Corporation.

The Articles of Incorporation of ADAM M. ROSEN, M.D. P.A. are hereby amended as follows:

1. Article I is hereby deleted and the following is inserted in lieu thereof:

ARTICLE I

1. The name of the Corporation shall be ARTHRITIS & RHEUMATISM ASSOCIATES, P.A.

2. All amendments included herein were adopted June 7, 1999 pursuant to Section 607.1004, F.S., and there is no discrepancy between the Corporation's Articles of Incorporation as theretofore amended other than the inclusion of these amendments and the omission of matters of historical interest.

3. This Amendment has been approved by unanimous consent of all of the Shareholders of the Corporation who are entitled to vote the 7th day of June, 1999.

4. This Amendment shall be effective upon its filing with the Secretary of State, State of Florida.

Alan S. Gassman, Esquire
1245 Court Street, Suite 102
Clearwater, FL 33756
(813) 442-1200
Florida Bar #: 371750

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IN WITNESS WHEREOF, the undersigned do hereunto set their hands this 7th day of June, 1999.

ARTHRITIS & RHEUMATISM
ASSOCIATES, P.A.

By: [Signature]
ALAN S. GASSMAN

Its: Vice President

ATTEST: [Signature]
ALAN S. GASSMAN

Its: Assistant Secretary

STATE OF FLORIDA)
COUNTY OF PINELLAS)

ON THIS 7th day of June, 1999, before me Ellen M. Tischer (name of notary) the undersigned notary, personally appeared ALAN S. GASSMAN, known to me, or who produced _____ as identification, and who did take an oath, to be the person whose name is subscribed to the above instrument, and being informed of the contents of said instrument, acknowledged that he voluntarily executed the same for the uses and purposes herein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

[Signature]
Notary Public

My Commission Expires:

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Alan S. Gassman, Esquire
1245 Court Street, Suite 102
Clearwater, FL 33756
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Florida Bar #: 371750

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