P96000002813

(Requestor's Name)				
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	MAIT	MAIL		
(Bı	isiness Entity Nar	me)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



700276072447

08/17/15--01044--025 **52.50

DIVIC TO PAID STORY

CLEWIS CLEWIS

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Robert Cyeli, M.D., P.A. DOCUMENT NUMBER: P9600001813						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Pobert Cueli M.D. Name of Contact Person Pobert Cueli Firm/ Company						
Firm/Company						
3071 NE 45 Street						
Address						
Ft. Lauderdale, Fl 33308 City/ State and Zip Code						
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Michele Reyes at (954) 767 5900 Name of Contact Person Area Code & Daytime Telephone Number						
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:						
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate Of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to Articles of Incorporation

	FIL	- 1 - 1 -		
\$!: ^^! DIVIU.	ŢAR.	v [:	1	.117

of	Stelle:
Robert Cuel; M (Name of Corporation as currently	.D. P. A. 15 AUG 17 PM 12: 57
(Name of Corporation as currently	filed with the Florida Dept. of State)
P 96000002813	
(Document Number of	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Broward Vidney Consultant	s Tour
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co"., A professional corporation name must contain the
B. Enter new principal office address, if applicable:	315 SE 13 S+
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ft. Lauderdale, Ft 33316
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	315 SE 13 St Ft. Lauderdale, Fi 33316
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address) .
New Registered Office Address:	, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept'the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	vaistered Agent if changing

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 Do	e		
X Remove	<u>v</u>	Mike Jos	<u>nes</u>		
_X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<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 sheets, if neces	sary). (Be spe	cific)			
				At the state of	
······································					<u>.</u>
					-
					· _ · · · · · · · · · · · · · · · · · ·
f an amendment provides for a	n exchange, rec	classification, or	cancellation of iss	sued shares,	
provisions for implementing th (if not applicable, indicate N	e amendment i	f not contained i	n the amendment	itself:	
(ij noi appneuoie, maieuie i	wzi)				
					•

The date of each amendment(s) adoption	: October	1,2015			
date this document was signed.	•	•	e of the second		
Effective date if applicable:	October 1	, 2015	DIVI Other than the late) 15 AUG 17 PM 12: 57		
	(no more than 90 da)	vs ajter amenament jue a	are) 15 AUG 17 TITLE OF		
Note: If the date inserted in this block do document's effective date on the Departme		statutory filing requiren	nents, this date will not be listed as the		
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		iber of votes cast for the	amendment(s)		
☐ The amendment(s) was/were approved I must be separately provided for each v					
"The number of votes cast for the	• •	ficient for approval			
by		· 			
	(voting group)				
The amendment(s) was/were adopted by action was not required.	the board of directors with	out shareholder action ar	nd shareholder		
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without s	hareholder action and sh	areholder		
Dated					
Signature	7/-1				
	president or other officer -	if directors or officers ha	ave not been		
selected, by an incorporator – if in the hands of a receiver, trustee, or other court					
	ciary by that fiduciary)				
K	OSERT CUE	11, MD.			
(Typed or printed name of person signing)					
PRESIDENT					
	(Title of pe	rson signing)			