## P46000096710

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D CUSHING

## COVER LETTER

\* TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Gastroenterology (	Consultants of Central Flor	ida P.A.			
DOCUMENT NUM	D06000056710			<u> </u>		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	Anoosheh Shaikh, Esq.					
		Name of Contact Perso	n			
		Firm/ Company	·	<del></del> .		
	5372 Bay Side Drive					
		Address				
Orlando, Florida 32819						
		City/ State and Zip Cod	e			
	anoosheh.shaikh@gmail.con	1				
	E-mail address: (to be u	sed for future annual report	notification)	_		
For further informat	ion concerning this matter, plea	se call:				
Anoosheh Shaikh, E	Esq.	407 at (	4460135	SECR	2023 FEB 13	-A.E
Nam	e of Contact Person	Area Co	de & Daytime Telephone N	umber	83	4.Erze:+
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	55.55 55.55	13 PK	177
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	10 10 10 10 10 10 10 10 10 10 10 10 10 1	K 4: 08	
	ailing Address mendment Section		Address Iment Section			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



January 18, 2023

ANOOSHEH SHAIKH, ESQ 5372 BAY SIDE DRIVE ORLANDO, FL 32819

SUBJECT: GASTROENTEROLOGY CONSULTANTS OF CENTRAL FLORIDA,

P.A.

Ref. Number: P96000056710

We have received your document for GASTROENTEROLOGY CONSULTANTS OF CENTRAL FLORIDA, P.A. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 723A00001182

FEB 1 3 2023

سر بالمامات

## Articles of Amendment to Articles of Incorporation of

GASTROENTEROLOGY CONSULTANTS OF CENTRAL FLORIDA, P.A.

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

( <u>Name</u>	of Corporation as currently fil	ed with the Florida Dept. of State)	
P96000056710			
	(Document Number of Co	rporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Flor</i>	rida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
	Torp, " "Inc, " or "Co". A pi	nany," or "incorporated" or the abbrevia ofessional corporation name must cont	
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		
	-		
	-	·-··	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
	<u>====</u>		
	_		
	-		2023
D. If amending the registered agent ar		in Florida, enter the name of the	<u> </u>
new registered agent and/or the new			— frame
Name of New Registered Agent	Anoosheh Shaikh, Esq.		_ ω : = #7
	5372 Bay Side Drive	0.00 	
	(Florida street a	uldress)	
New Registered Office Address:	Orlando	. Florida 328195	08
	ıCir.	O (Zij	o Code)
New Registered Agent's Signature, if c	hanging Registered Agents		
I hereby accept the appointment as regist	ered agent. I am familiar with	and accept the obligations of the position	1.
		2	
	mosh & VI	habb	
<del></del>	Signature of New Regis	tered Agent, if changing	_
	1 / 1	<del>-</del>	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Moore, Keith	10800 Dylan Loren Circle Ste 102
Add			Orlando, Florida 32825
X Remove			
2) X Change	Р	SHAIKH, ANIQ	10800 Dylan Loren Circle Ste 102
Add			Orlando, Florida 32825
Remove 3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific	<i>)</i>			
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an amendment provisions for im-	provides for an exc plementing the am	hange, reclass	<u>ification, or c:</u> Leontained in	ancellation of i	ssued shares,	
(if not applica	ible, indicate N/A)	endinent it its	contained in	the amendine	at itseir.	
		<del></del>				
	<del></del>					
					<del></del>	
					<del></del>	
		<u>-</u>		<u> </u>		

	pption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
<b>Note:</b> If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing require artment of State's records.	ements, this date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without sh	hareholder action and shareholder
☐ The amendment(s) was/were adop by the sharcholders was/were suff	ted by the shareholders. The number of votes cast for the	ne amendment(s)
must be separately provided for e	oved by the shareholders through voting groups. The for ach voting group entitled to vote separately on the amen or the amendment(s) was/were sufficient for approval	4.
by		
<i>V)</i>	(voting group)	
Dated	21 2022	
ا Signature	Hura Strawn	
	ector, preddent or other officer - if directors or officers	
	by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	e, or other court
арролце		
	ANIX SHAIKH-	
_	(Typed or printed name of person signing)	
_	President (Former Vice President (Title of person signing)	resident/Treasures).
	(Title of person signing)	· /