96000087

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: COMPLETE | E HEALTH MEDICAL CENTER INC |
|--|--|
| | |
| DOCUMENT NUMBER: P96000087994 | |
| The enclosed Articles of Amendment and f | ee are submitted for filing. |
| Please return all correspondence concerning | g this matter to the following: |
| LARRY PITTMAN | |
| (Name | of Contact Person) |
| PITTMAN CONSULTING SERVICE | E INC |
| (F | irm/ Company) |
| 6051 ESTERO BOULEVARD | |
| | (Address) |
| FORT MYERS BEACH FL 33931 | |
| (City/ S | State/ and Zip Code) |
| For further information concerning this mat | tter, please call: |
| LARRY PITTMAN | at (239) 463-2825 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amou | nt: |
| | |
| Mailing Address Amendment Section Division of Corporations | Street Address Amendment Section Division of Corporations 409 F. Gaines Street |

Tallahassee, FL 32399

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 4, 2005

LARRY PITTMAN
PITTMAN CONSULTING SERVICE INC
6051 ESTERO BLVD.
FORT MYERS BEACH, FL 33931

SUBJECT: COMPLETE HEALTH MEDICAL CENTER, INC.

Ref. Number: P96000087994

We have received your document for COMPLETE HEALTH MEDICAL CENTER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6869.

Letter Number: 905A00000272

Teresa Brown Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

| | | FILE |
|--|---|-----------------------------------|
| , , | | FILED |
| | | 05 JAN 31 PM 1 |
| | Articles of Amendment | ALL AHASSEE, FLO |
| | to | SEE, FLO |
| | Articles of Incorporation of | |
| COMPLETE HEALTH | MEDICAL CENTER, INC. | |
| (Name | e of corporation as currently filed with the Flori | da Dept. of State) |
| P9600008799 | 94 | |
| | (Document number of corporation (if known | own) |
| | of section 607.1006, Florida Statutes, the | |
| NEW CORPORATE NA | | |
| COMPLETE CONSULTING, | | |
| (Must contain the word "corpora | ation," "company," or "incorporated" or the abbrest contain the word "chartered", "professional as: | eviation "Corp.," "Inc.," or " |
| AMENDMENTS ADOPT | TED- (OTHER THAN NAME CHANGE SHOPE) It amended, added or deleted; (BE SPEC | GE) Indicate Article Nu |
| AMENDMENTS ADOP and/or Article Title(s) bein | TED- (OTHER THAN NAME CHANG ig amended, added or deleted: (BE SPEC | GE) Indicate Article Nu |
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| and/or Article Title(s) bein | g amended, added or deleted: (BE SPEC | GE) Indicate Article Nu CIFIC) |

(continued)

| The date of each amendment(s) adoption: DECEMBER 15, 2004 |
|---|
| Effective date if applicable: DECEMBER 15, 2004 (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) |
| ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the amendment(s) was/were sufficient for approval by |
| (voting group) |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| Signed this 27 day of JANUARY 2005 |
| Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| JOAN CRAFT |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |

FILING FEE: \$35