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2018 NOV 16 PH 4: 23
SUBJECTABLY OF STATE

C. GOLDEN 100 21 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	RICS & ASSOCIATES, PA	\ 			
DOCUMENT NUMB	P97000078792					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	NERELYS PER	REZ CANTILLO				
•		Name of Contact Perso	n			
	PRIMECARE MEDICAL MANAGEMENT					
		Firm/ Company				
	7765 NW 48 ST, SUITE 300					
	Address					
	DORAL, FL	33166				
•		City/ State and Zip Cod	e			
	ncantillo@primeca	refe.net				
	E-mail address; (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
NERELYS PEREZ		at (
Name of Contact Person Area Code & Daytime Teleph		ode & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
☐ \$35 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 2018 NOV 16 PH 4: 23

FRAGA PEDIATRICS & ASSOCIATES, P.A.

	South the second
(Name of Corporation as currently	filed with the Florida Dept. of State)AHASSEF FI
P97000078792	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this I its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C word "chartered." "professional association," or the abbreviation "I	'o" A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)	
(maning marcis <u>MAT BLATOST OF TRAIL BOSE</u>)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Vancari Vanc Davida and Langua	
Name of New Registered Agent	
(Florida stre	et address)
v n	ra - t
New Registered Office Address:	, Florida City)
	•
New Registered Agent's Signature, if changing Registered Agent:	and the second second
I hereby accept the appointment as registered agent. I am familiar w	un ana accept the obligations of the position
Signature of New Re	gistered 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 = ChiefExecutive Officer; CEO = 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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	RENE CASANOVA	1144 SE 3RD AVE
X Add			FORT LAUDERDALE
Remove			FL, 33316
2) Change	DP	CARL G WHETSELL	4131 SW 6 ST
Add			CORAL GABLES, FL 33134
X Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			<u></u>
Remove			- 10
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).		
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<u>.</u>		
f an amendment provides for an exch provisions for implementing the amer	inge, reclassification, or cancellated dment if not contained in the am-	tion of issued shares, endment itself:
(if not applicable, indicate $N(A)$		
		····
-		

•	NOVEMBER 14th, 2018	
The date of each amendment date this document was signed		, if other than the
Effective date <u>if applicable</u> :	NOVEMBER 1st, 2018	
***************************************	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date when Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	·
"The number of vote:	s east for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	11/14/18	
Signature	3v a director, president or other priver – if directors or officers have not been	
S	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	LUIS F ZAYAS	
	(Typed or printed name of person signing)	
	MANAGER	

(Title of person signing)