P98000041767

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TO: Amendment Section
Division of Corporations

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NAME OF CORPO	RATION: <u>SUNCOAST</u> C	CLINICAL RESEARCH, INC	
DOCUMENT NUM	BER: <u>P98000041767</u>		
The enclosed Articles	s of Amendment and fee are su	ubmitted for filing. Please return all correspondence	
concerning this matte	er to the following:		
	PRICTINA M TUDOM D	ero.	
	KRISTINA M. HUDSON, E.	Name of Contact Person	
	BOOTH & COOK, P.A.	Name of Contact Person	
		Firm/ Company	
3030 STARKEY BLVD., SUITE 100		JITE 100	
		Address	
	TRINITY, FL 34655		
	•	City/ State and Zip Code	
	Jselk@suncoastclinicalresearc	rch.com	
	E-mail address: ((to be used for future annual report notification)	
For further information	on concerning this matter, pleas	se call:	
KRISTINA M. HUD	DSON	at (127) 842-9105 =	
N	ame of Contact Person	Area Code & Daytime Telephone Number	
Englosed is a chuck for	or the following amount made:	payable to the Florida Department of State:	
Enclosed is a circum	or the following amount made	payable to the Fortun Separation of State.	į
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	at(\(\sum \) 84\(\alpha \) 9/10\(\sum \) 7/2 7/3 7/3 7/4 7/4 7/4 7/4 7/4 7/4 7/4 7/4 7/4 7/4	
Am Div P.O	iling Address endment Section dision of Corporations Box 6327 lahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

SUNCOAST CLINICAL RESEARCH, INC.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

(Name of Corporation as currently filed with the Florida Dept. of Stat	<u></u>		_
98000041767	<u>c</u>)		
(Document Number of Corporation (if known)			
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the s Articles of Incorporation:	following	amendme	ent(s
. If amending name, enter the new name of the corporation:			
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mus chartered," "professional association," or the abbreviation "P.A."	breviation	The new "Corp.,' the word	,
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)			
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_		
	*/2 :::}	2023	
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		- may
Name of New Registered Agent	<u> </u>	۽ ف	- ;-
	1 1 · · · · · · · · · · · · · · · · · ·		ا اوپ اوپ
(Florida street address) New Registered Office Address: , Florida	· . · · · · · · · · · · · · · · · · · ·	35	
(City)	(Zip Co	J.1	

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	PT	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.S.D	BARBARA J. MANNING	11302 TAYPORT LOOP
Add			NEW PORT RICHEY, FL 34654
X Remove			
2) Change	V,T,D	GREGORY MANNING	11229 RAGSDALE CT.
X Add			NEW PORT RICHEY, FL 34654
Remove 3) X Change	P,S,D	JENNIFER SELK	5604 GULF DRIVE
Add			NEW PORT RICHEY, FL 34652
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	I DV SDPCINC)
	(Be specific)
	
	
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<u>provisions for implementing the amen</u>	ange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
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JANUARY 1, 2023
The date of each amendment(s) adoption:, if other than the date this document was signed.
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ The amendment(s) was/were adopted 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)
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) (Typed or printed name of person signing)
resident
(Title of person signing)