## P98000094377

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Tomoka Eye Associates, P.A. (Name of Corporation as currently filed with the Florida Dept. of State) P98000094377 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. 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: Name of New Registered Agent (Florida street 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 with and accept the obligations of the position. Signature of New Registered Agent, if changing

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 Doc	
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>	<u>Addres</u> s
1) Change	T	Mark E. Kennedy, M.D	345 Clyde Morris Blvd., Ste. 330
Add			Ormond Beach, Florida 32174
X Remove			
2) Change	Τ	Ruston L. Hess, D.O.	345 Clyde Morris Blvd., Ste. 330
X Add			Ormond Beach, Florida 32174
Remove Change			
Add			
Remove			<del></del>
4) Change	-		<del> </del>
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding add (Attach additional sheets, if n	itional Articles, enter cha ecessary). (Be specific)	nge(s) here:		
N/A				
		<del> </del>	·	
			<del></del>	····
		·		
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F. If an amendment provides provisions for implementi	ng the amendment if not	fication, or cancellati contained in the ame	on of issued shares, ndment itself:	
(if not applicable, indic	ate N/A)			
N/A 				
	<u> </u>			<del></del>
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The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Sepi Effective date <u>if applicable:</u>	ember 1, 2025	
	(no more than 90 days a fieramendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, t partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholde	er action and shareholder
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amend ifficient for approval.	iment(s)
	proved by the shareholders through voting groups. The following seach 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	<u>;</u>	,
	(voting group)	
Dated_Septemb	per 5, 2025	
Signature	moth D'Rest MD	
selecte	rector, posident or other officer – if directors or officers have not I, by an incorporator – if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
	Timothy D. Root, M.D	
	(Typed or printed name of person signing)	
	Presiden!	
	(Title of person signing)	

## Articles of Amendment to Articles of Incorporation of

to

Tomoka Eye Associates, P.A.

Tomoka Eye Associates, r.A.	
(Name of Corporation as currently filed with th	e Florida Dept. of State)
P98000094377	
(Document Number of Corporation (	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> its Articles of Incorporation:	Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional "chartered." "professional association," or the abbreviation "P.A."	incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida new registered agent and/or the new registered office address:	, enter the name of the
Name of New Registered Agent	
Nume of New Negistereu Agent	
(Florida street 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 with and accep	t the abligations of the position.
	•
Signature of New Registered Agen	ut. if changing
	., .
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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	
	<u>.</u> <u>SV</u>		
_X Add	<u>3 v</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Mark E. Kennedy, M.D	345 Clyde Morris Blvd., Ste. 330
Add			Ormond Beach, Florida 32174
X Remove			
2) Change	T	Ruston L. Hess, D.O.	345 Clyde Morris Blvd., Ste. 330
X Add			Ormond Beach, Florida 32174
Remove 3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
(ij noi applicable, indicale ivizi) N/A

. .

The date of each amendment		, if other than the
ate this document was signed fective date if applicable:	September 1, 2025	
<u> </u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehold	der action and shareholder
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amen ere sufficient for approval.	dment(s)
	re approved by the shareholders through voting groups. The following and for each voting group entitled to vote separately on the amendment(	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated_Sep	tember 5, 2025	
Signature	Limoth D. Rat M.D	
SC	y a director, president or other officer – if directors or officers have no elected, by an incorporator – if in the hands of a receiver, trustee, or other pointed fiduciary by that fiduciary)	
	Timothy D. Root, M.D	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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