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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2006

JOSE ESCALANTE MD JOSE E. ESCALANTE CARDIOLOGY ASSOCIATES 777 E. 25TH STREET, SUITE 214 HIALEAH, FL 33013

SUBJECT: CASTELLANOS & ESCALANTE CARDIOLOGY ASSOCIATES, P.A.

Ref. Number: P98000096433

We have received your document for CASTELLANOS & ESCALANTE CARDIOLOGY ASSOCIATES, P.A., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist

Letter Number: 806A00044825



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF C	ORPORATION:CASTELLAN	OS & ESCALANTE CA	RDIOLOGY ASSOCIATES, P.A.			
DOCUMENT	NUMBER: P980000	96433				
The enclosed A	Articles of Amendment and fee are	submitted for filing.				
Please return a	all correspondence concerning this		W6-3002			
	JOSE ESCALA	NTE MD	WOP			
•	(Name of	Contact Person)				
	JOSE E. ESCALANTE CARI	OLOLOGY ASSOCIATES	P.A.			
	(Firm/ Company)					
	777 E. 25th St	reet, Suite 214				
(Address)						
00	Hialeah, FL 3	3013				
Ö Ö For Farther info	(City/ State	e and Zip Code) ease call:				
JOSE O	ESCALANTE	205	6-1997			
8 G (1)	Name of Contact Person)		ne Telephone Number)			
Enclosed is a c	heck for the following amount:	<b>*1.</b> .				
₹35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amendi Division P.O. Bo	<u>x Address</u> ment Section n of Corporations ox 6327 ssee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center O				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CASTELLANOS & ESCALANTE CARDIOLOGY ASSOCIATES, P.A.

(Name of corporation as currently filed with the Florida Dept. of State)

P98000096433
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
JOSE E. ESCALANTE CARDIOLOGY ASSOCIATES P.A.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
<b>5</b> .0 2
F1 C ***********************************
Es = T
<b>&gt;</b>
(Attach additional pages if necessary)
If an amendment provides for 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)
<del>-</del>

(continued)

The date of each amendment	t(s) adoption:	6/27/06
Effective date if applicable:	6/27/06	
	(no more than 90 days	after amendment file date)
Adoption of Amendment(s)	(CHECK ON	<u>(E)</u>
		by the shareholders. The number of votes cast for vas/were sufficient for approval.
	t must be separately j	by the shareholders through voting groups. The provided for each voting group entitled to vote
"The number of	f votes cast for the an	nendment(s) was/were sufficient for approval by
	(voting group)	
	was/were adopted by tion was not required	the board of directors without shareholder action.
The amendment(s) shareholder action		the incorporators without shareholder action and
selec	ted, by an incorporator - inted fiduciary by that fic	ner officer - if directors or officers have not been if in the hands of a receiver, trustee, or other court fuciary)
	PIRECTOR	nted name of person signing)
	(Ti	itle of person signing)

FILING FEE: \$35