

P98000098669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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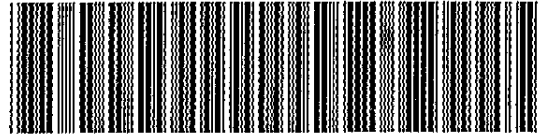
(Business Entity Name)

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03 JUN 18 PM 2:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend

T BROWN JUN 23 2003

**JACK E. BARON, M.D., P.A.**  
BOARD CERTIFIED FAMILY PHYSICIAN

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CENTURY PLAZA, SUITE 2  
2061 ENGLEWOOD ROAD  
ENGLEWOOD, FLORIDA 34223  
Telephone (941) 473-7712  
Fax (941) 473-7717

May 12, 2003

Division Of Corporations  
Department of State  
P.O. Box 6327  
Tallahassee, Florida 32314

To Whom It May Concern:

Per the instruction form for changes/additions to the Articles of Incorporation, this cover letter is supplied with the requested information.

Jack E. Baron, M.D., P.A.  
2061 Englewood Road  
Suite 2  
Englewood, Florida  
Phone Number: 941-473-7712  
Fax: 941-473-7717

Addition Made: Kathy Susan Baron, Vice-President, and Secretary.

Enclosed are the required signed forms and payment. Should you require further information, please do not hesitate to contact us.

Sincerely,

Jack E. Baron, M.D., P.A., Director  
Kathy Susan Baron, Vice-President and Secretary

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

FILED  
03 JUN 18 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Jack E. Baron, M.D., P.A.

same

(present name)

P98000098669

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

**FIRST:** Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

Add: Kathy Susan Baron - Article VII  
Title: Vice President, Secretary  
2061 Englewood Road  
Century Plaza, STE. 2  
Englewood, FL 34223

I, Kathy Susan Baron, am familiar with  
the obligations of these offices.  
① Vice President  
② Secretary.

Signed Kathy Susan Baron  
Date 05/12/03

**SECOND:** 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, are as follows:

**THIRD:** The date of each amendment's adoption: 05-13-03

**FOURTH:** Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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 13 day of May, 2003.

Signature

Jack E. Baron, M.D.  
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Jack E. Baron, M.D.  
(Typed or printed name)

Director  
(Title)