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2010 JUL -9 PM 4: 22 SECRETARY OF STATE

C. GOLDEN

JUL 1 0 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FLOR	RIDA ENT ADULT & PET	DIATRIC, P.	1.	
DOCUMENT NUMBER: P9900001				
The enclosed Articles of Amendment	and fee are submitted for fil	ing.		
Please return all correspondence conce	erning this matter to the follo	owing:		
Omar Fadhli				
	Name of C	ontact Persor	1	
	Firm/	Company		
1162 CYPRESS	S GLEN CIRCLE			
KISSIMMEE, F	Address KISSIMMEE, FL 34741			
	City/ State	and Zip Code	:	
dr.fadhli@myfloridae	ent.com			
E-mail add	ress: (to be used for future a	ınnual report	notification)	
For further information concerning this	s matter, please call:			
Adam O. Kirwan	at	407	210-6622	
Name of Contact Person	n	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following a	mount made payable to the	Florida Depa	ertment of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificat	iling Fee & S43.75 Fi te of Status Certified (Additional enclosed)	Copy al copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231	ions	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

FLORIDA ENT ADULT & PEDIATRIC, P.A.	2018 JUL -9 PM 4: 22
(Name of Corporation as currently fil	ed with the Florida Dept. of State)
P99000017378	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Document Number of Co.	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
FLORIDA ENT ADULT & PEDIATRIC, INC.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation 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 MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent OMAR	Some Agent. Removed Some Agent. Removed and Title" DR "ADR"
	ABR
(Florida street a	ddress)
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	,

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	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PSTD	OMAR FADHLI	1162 CYPRESS GLENCIR
Add			KISSIMMEE, FL 34741
Remove			
2) Change			
Add			
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)
Article III is hereby deleted and in lieu thereof the following Article shall be added:
ARTICLE III - The purpose for which this corporation is organized is:
The business purpose of the company shall be to conduct any and all lawful business.

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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) NA

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> :	dment file date)
Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately of	
"The number of votes cast for the amendment(s) was/were sufficient for ap	pproval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without sharehold action was not required.	der action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder a action was not required.	ction and shareholder
Dated 6/21/18	
Signature	
(By a director, president or other officer - if directors of	
selected, by an incorporator – if in the hands of a recei appointed fiduciary by that fiduciary)	ver, trustee, or other court
OMAR ADR FADHLI	
(Typed or printed name of person si	gning)
PSTD	

(Title of person signing)