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Account Number : 076077001702 Phone : (407) 841-1200 : (407)423-1831 Fax Number

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Jeffrey.Greenspoon@health-first.org

COR AMND/RESTATE/CORRECT OR O/D RESIGN ORTHOPEDIC AND SPORTS MEDICINE CENTER OF BREVARD

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Roberts JUN 0 8 2010 6/8/2010

DEAN MEAD ORLANDO (((H10000132933 3)))

**☑** 002

-10 JUN -8 PM 2:46

**Articles of Amendment** Articles of Incorporation SECRETARY OF STATE TABLEAHASSES, FLORIDA

The Orthopedic and Sports Medicine Center of Brevard, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P99000022877

(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the follo
A. If amending name, enter the new name of the corporation	on:
Viera Sports Medicine and Orthor	
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered." "professional association of the word "chartered."	lorp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	Viera Health Plaza Medical Office
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Bldg., 8725 N. Wickham Rd.,
	Suite 301, Viera, FL 32940
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 new registered agent and/or the new registered office ad	
Name of New Registered Agent:	
New Registered Office Address: (Flor	ida street address)
(734.	, Florida (Zip Code)
(City, New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fam	
Signature of Nev	Registered Agent, if changing

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Hamending 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)

Title .	Name	Address	Type of Action
<del></del>			Add
<del></del> -			
	· · · · · · · · · · · · · · · · · · ·		
E. <u>If amen</u> (attach a	ading or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	
<u>provisi</u>	mendment provides for an exchange tons for implementing the amendments applicable, indicate N/A)	e, reclassification, or cancel at if not contained in the ar	lation of issued shares, nepdment itself:
			. '
			· ·

## DEAN MEAD ORLANDO (((H10000132933 3)))

The date of each amendment(s) ac	doption: June, 3, 2010		
WER discussion in the bit	(date of adoption is required)		
Effective date if applicable:  (no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s ifficient for approval.		
	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):		
"The number of votes cast f	for the amendment(s) was/were sufficient for approval		
by			
(voti	ng group)		
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder		
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder		
Dated June 3,	2010		
selected,	ector, president or other officer - If directors or officers have not been by an accorporator - if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)		
	Jeffrey A. Greenspoon, M.D.		
	('Typed or printed name of person signing)		
	President		
	(Title of person signing)		