

P99 0000 52356

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C. BRUMBLEY

DEC 10 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Neurology Specialists of Jupiter, P.A

DOCUMENT NUMBER: P99000052356

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leonard Hinton

Name of Contact Person

I.G Medical Services

Firm/ Company

601 University Blvd, Suite 102

Address

Jupiter, FL 33458

City/ State and Zip Code

leonard@bellahhealthservices.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leonard Hinton

at (917) 364-8984

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

Neurology Specialists of Jupiter, P.A

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

199000052356

(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:

The new 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)

601 University Blvd, Suite 102

Jupiter, FL 33458

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

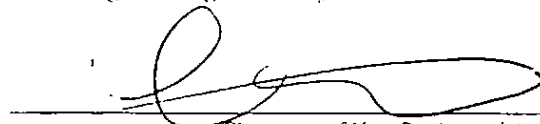
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Leonard Hinton
919 SW 57th Ave
(Florida street address)

New Registered Office Address: Coral Gables, Florida 33144
(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

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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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 V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>D</u>	<u>Mark J. Stafford</u>	<u>9216 SE RIVER TERRACE</u>
<input type="checkbox"/> Add			<u>TEQUESTA, FL 33469</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>Leonard Hinton</u>	<u>919 SW 57th Ave</u>
<input checked="" type="checkbox"/> Add			<u>Coral Gables, FL 33144</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(if not applicable, indicate N/A)

[illegible]

November 4, 2021

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

November, 4 2021

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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)

11/04/2021

Dated _____

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Leonard Hinton

(Typed or printed name of person signing)

Manager

(Title of person signing)

**SPECIAL MEETING OF THE BOARD OF DIRECTORS AND SHAREHOLDER OF
NEUROLOGY SPECIALISTS OF JUPITER, P.A., A FLORIDA CORPORATION**

A SPECIAL MEETING of the SHAREHOLDER of NEUROLOGY SPECIALISTS OF JUPITER, P.A., a Florida Corporation, was held at the offices of the Corporation on the 4 day of November, 2021.

The sole SHAREHOLDER of the Corporation was present.

MARK J. STAFFORD presided over the meeting as Chairman thereof.

The Chairman then announced that the Special Meeting had been called for the specific purpose of approving the transfer of all two thousand (2,000) shares of common stock of NEUROLOGY SPECIALISTS OF JUPITER, P.A., a Florida Corporation, from MARK J. STAFFORD to LG MEDICAL SERVICES, LLC. A copy of the Stock Powers was presented to the Meeting and the Secretary was requested to spread the same upon the Minutes. After due discussion, the following resolution was unanimously approved:

RESOLVED That the Board of Directors have determined that it is in the best interest of the Corporation to consent to the transfer of all two thousand (2,000) shares of common stock of NEUROLOGY SPECIALISTS OF JUPITER, P.A., a Florida Corporation, from MARK J. STAFFORD to LG MEDICAL SERVICES, LLC.

The Board of Directors hereby ratify and approve the aforesaid transfer and all of the documentation executed by the Officers of the Corporation in accordance therewith.

Further, the Officers of this Corporation are hereby authorized and directed to execute any and all further documentation required to perfect said transfer.

There being no further business to come before the meeting, upon motion duly made, seconded, and unanimously carried, the meeting was adjourned.

MARK J. STAFFORD, Chairman

THE UNDERSIGNED SHAREHOLDER, was present for the above meeting and does hereby ratify and approve the Minutes and waive formal notice thereof.

CERTIFICATION

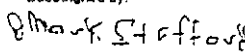
I, the undersigned, Director of NEUROLOGY SPECIALIST OF JUPITER, P.A., a Florida Corporation, (the "Corporation") does hereby certify that the following is a true and correct copy of a Resolution duly adopted by the Board of Directors of the Corporation on the 4th day of November, 2021, and that such resolution is in full force and effect, unaltered and unabated:

RESOLVED: That the Board of Directors have determined that it in the best interests of this Corporation to consent to the transfer of all two thousand (2,000) shares of common stock of NEUROLOGY SPECIALISTS OF JUPITER, P.A., a Florida Corporation, from MARK J. STAFFORD to LG MEDICAL SERVICES, LLC.

The Board of Directors hereby ratify and approved the aforesaid transfer and all the documentation executed by the Officers of the Corporation in accordance thereof.

Further, the Officers of the Corporation are authorized and directed to execute any and all further documentation required to perfect said transfer.

WITNESS, the execution hereof the 4th day of November, 2021.

DocuSigned by:

AC11A2512812425

MARK J. STAFFORD, Director