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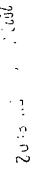
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COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: BRIAN S. ZIEGI	ER, M.D., P.A.	
	ивек:		
The enclosed Article	es of Amendment and fee are si	ubmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	BRIAN S. ZIEGLER		
		Name of Contact Perso	n
	BRIAN S. ZIEGLER, M.D.,	P.A.	
		Firm/ Company	
	830 EXECUTIVE LANE, S	, ,	
		Address	
	ROCKLEDGE, FL 32955		
		City/ State and Zip Cod	e
For further informati	ion concerning this matter. plea		
	e of Contact Person	at (de & Daytime Telephone Number
	for the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.G	nendment Section vision of Corporations D. Box 6327 Bahassee, FL 32314	Amend Divisio The Co	Address Innent Section In of Corporations Entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

BRIAN S. ZIEGLER, M.D., P.A.

(Name of Corporation as currently filed with the Florida Dept. of State) P99000060163 (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 its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BRIAN S. ZIEGLER, M.D., INC. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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) C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX) The new 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 (Florida street address) New Registered Office Address: (City) (Zip Code)
(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) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BRIAN S. ZIEGLER, M.D., INC. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "lnc.," 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) 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: Name of New Registered Agent (Florida sweet address) New Registered Office Address: Florida
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BRIAN S. ZIEGLER, M.D., INC. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation in 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) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida Florida
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(Florida street address) New Registered Office Address:, Florida
(Florida street address) New Registered Office Address:, Florida
New Registered Office Address:, Florida
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.
I hereby accept the appointment as registered agent. I am jumittar with and accept the obtigations 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) (e). F.S.

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>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>\$V</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change			· · · · · · · · · · · · · · · · · · ·	
Add				<u> </u>
Remove				
5) Change				
Add				
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6) Change		_		
Add				
Remove				

	necessary). (Be	specific)			
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	,				
	. fau au auahamaa	<u>, reclassification, or</u>	cancellation of iss	ued shares,	
an amendment provides	s for an exchange,		: All a a a d		
provisions for implement	ting the amendme	ent if not contained	in the amendment	<u>itself:</u>	
an amendment provides provisions for implement (if not applicable, indi	ting the amendme	nt if not contained	in the amendment	<u>itself:</u>	
provisions for implement	ting the amendme	ent if not contained	in the amendment	itself:	
provisions for implement	ting the amendme	ent if not contained	in the amendment	itself:	
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provisions for implement	ting the amendme	ent if not contained	in the amendment	itself:	
provisions for implement	ting the amendme	ent if not contained	in the amendment	itself:	
f an amendment provides provisions for implement (if not applicable, indi	ting the amendme	ent if not contained	in the amendment	itself:	

. . .

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	ILING DATE	
Effective date it applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendness sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	atement
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,,	
~ <u> </u>	(voting group)	
Dated	July 12, 2023	
selec	a director, president another officer – if directors or officers have not be cted, by an incorporator – if in the hands of a receiver, trustee, or other pinted fiduciary by that fiduciary)	
	BRIAN S. ZIEGLER	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	

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