

S00397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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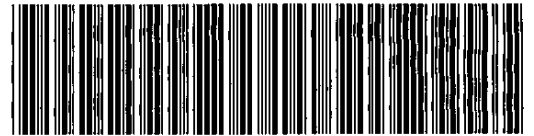
(Business Entity Name)

(Document Number)

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Name Change
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR

12/1/10

*00789, 04076, 00707, 00671

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Peter G Ballas, II, M.D., P.A.

Name of Corporation

DOCUMENT NUMBER: S00397

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marianne Hammack

Name of Contact Person

Matteis & Christopher, PA

Firm/Company

29 SE 5th Street

Address

Boca Raton, FL 33432

City/State and Zip Code

marianne@mccpa.com

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

For further information concerning this matter, please call:

Marianne Hammack

Name of Contact Person

at (561) 241-4444

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2010

Marianne Hammack
Matteis & Christopher, P.A.
29 SE 5th Street
Boca Raton, FL 33432

SUBJECT: PETER G. BALLAS II, M.D., P.A.
Ref. Number: S00397

We have received your document for PETER G. BALLAS II, M.D., P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 210A00026410

Articles of Amendment
to
Articles of Incorporation
of

FILED

2010 DEC -1 PM 4:22

Peter G. Ballas II, M.D., P.A.
(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S00397

(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:

Peter G. Ballas II, P.A. 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)

same

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

same

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:

same

New Registered Office Address:

(Florida street address)

(City)

Florida
(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

The date of each amendment(s) adoption: 10-1-10
(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 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)

- ☐ 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.

Dated 11-29-16

Signature Peter G. Ballas II PA
(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)

Dr. Peter G. Ballas II
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)