## 598941

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S. ROJERTS
JUL 26 2023

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: <u>Samina R. Q</u>	ureshi, M.D., P.	Α
DOCUMENT NUM	BER:S98941		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Samina R. Qureshi		
		Name of Contact Per	son
	SRQ, M.D., P.A. ',		
		Firm/ Company	
	2201 NE 52 Street		
		Address	
	Lighthouse Point, F	L 33064	
		City/ State and Zip C	ode
	qureshi.zsmd@gmail	.com	
	E-mail address: (to be us	sed for future annual rep	ort notification)
	on concerning this matter, pleas	05/	. 702 5250
Jack F. Cr	issy of Contact Person	at ( <u>954</u> Area	782–5250 Code & Daytime Telephone Number
	or the following amount made		•
[X] \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amo Divi The 241	eet Address endment Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Samina R. Qureshi, M.D., P.A.

	<u></u>	<u> </u>	<u> </u>
(Name of Corporation as curr	ently filed with the Flori	da Dept. of State)	
S98941			
(Document Numb	per of Corporation (if know	vn)	
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corpo	ration adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporation	n <u>:</u>		
SRQ, M.D., P.A.			The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "F	". A professional corpo	orated" or the abbrevia ration name must cont	ttion "Corp.," tain the word
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			202
	• · · · · · · · · · · · · · · · · · · ·		
			<del></del>
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			<del></del>
			<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add  Name of New Registered Agent		the name of the	
(Floric	da street address)		<del></del>
Nina Basistana d Office Address		. Florida	
New Registered Office Address:	(City)		ip Code)
New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am family	liar with and accept the ol		n.
Signature of No	ew Registered Agent, if ch	anging	
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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3 ) Change	<del></del>	_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<del></del>		<del></del>	
Add				
Remove				

Attach additional sheets, if nec	essary). (Be sp	recific)			
				<u> </u>	·
					<u> </u>
			-	-11	
		<del></del>		· · · -	
				<del></del>	<u></u>
		<del> </del>	<del></del>		-
f an amendment provides fo provisions for implementing	r an exchange, r	eclassification,	or cancellation	of issued shares,	
(if not applicable, indicat	te N/A)	. II HOL CORTAINS	one the amena		
	<del></del>	<del></del>			
<u> </u>					
		<u>.</u>			

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sharehold	er action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amend ifficient for approval.	lment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	statement j:
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv	······································	
,	(voting group)	
DatedApril	21, 2023	
Signature		
(By a d	irector, president or other officer - if directors or officers have not	
	d, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary)	er court
	Samina R. Qureshi	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	