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09/10/14--01021--005 \*\*43.75

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Flagler Di	agnostic Cent	er, Inc	
DOCUMENT NUMBI	ER: <b>J27706</b>			
	f Amendment and fee are sul	bmitted for filing.	•	
Please return all corresp	ondence concerning this mat	ter to the following:		
(	Graciela Pozo,	MD		
_		Name of Contact Person	1	
	Flagler Diagno	stic Center		
-		Firm/ Company		
(	8000 W Flagle	r St # 101		
-		Address		
1	Miami, FL 3314			
<u>-</u>	, , , , , , , , , , , , , , , , , , ,	City/ State and Zip Code		
•	·	•		
lyne	ette@9090real			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Lynette Rosales		_at (305_	, 271-8562	
Name of Contact Person		at (305) 271-8562  Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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		Street	Address	
Ame	ndment Section	Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Clifton Building				
Talla	hassee, FL 32314	2001 E	Executive Center Circle	

Tallahassee, FL 32301



September 17, 2014

GRACIELA POZO, MD FLAGLER DIAGNOSTIC CENTER 8000 W. FLAGLER ST. #101 MIAMI, FL 33144

SUBJECT: FLAGLER DIAGNOSTIC CENTER, INC.

Ref. Number: J27706

We have received your document for FLAGLER DIAGNOSTIC CENTER, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 514A00019924

## Articles of Amendment to Articles of Incorporation of

Flagier Diagnostic Center			<u> </u>
(Name of Corporation as current	ly filed with the Florida Dep	t. of State)	
J27706			<del></del>
(Document Numbe	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Pre</i>	ofit Corporation adopts the followi	ng amendment(s) to
A. If amending name, enter the new name of th	e corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A pr		
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)	able: ADDRESS)		
	<del></del>		- <b>F</b> S S S S S S S S S S S S S S S S S S S
	-		- 7
C. Enter new mailing address, if applicable:	T BOW		29
(Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>		
			_ <b>長</b> 222 <b>少</b> 267
	<del></del>	<u> </u>	_ <b>@</b> %
D. If amending the registered agent and/or reg new registered agent and/or the new register		ida, enter the name of the	
Name of New Registered Agent			
		<u> </u>	
,	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Ziv Code)	<u> </u>
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered age	eni i am jamiliar wiin and ac	cepi ine obligations of the position	•
Signatura	of New Registered Agent, if ch	anging	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	Alvaro Rauseo	6734 NW 107 PI
Add			Doral, FL 33178
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or</u>	adding additional Arti al sheets, if necessary).	(Pagnerica)	e(s) here:		
(Attach addition	ai sneeis, ij necessary).	(Be specific)			
	<del></del>				
<u> </u>					_
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			<del></del>		
		_		•	
				<del></del>	
. If an amendmen	nt provides for an exch	ange, reclassifica	tion, or cancellat	tion of issued share	es,
(if not app	implementing the amer licable, indicate N/A)	nament ii not con	itained in the am	enament itseit:	
	,				
<del> </del>					
		<del></del>			
		<del>-</del>			
<u> </u>					

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
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.	
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)	
Graciela Pozo, MD	
(Typed or printed name of person signing)	
President	
(Title of person signing)	