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(Re	questor's Name)	
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PICK-UP	■ WAIT	MAIL
/P.	siness Entity Nan	no)
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SECRETARY OF STATE ALLAHASSEE, FLORIDA



DEC 1 5 2016 T. LEMMELIX

COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

5000 NW P	rofessional Center Condo	ominium Associatio	on Inc.
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee	e are submitted for filing.		
Please return all correspondence concerning	this matter to the following	ng:	
Patrick Gurley			
	(Name of Conta	act Person)	
N/A			
- .	(Firm/ Con	npany)	
5000 NW 27th Court, Suite B			
	(Addre	ss)	
Gainesville, Fl, 32606			
	(City/ State and	Zip Code)	
www.medicalimagingfl.com			
E-mail address: (t	o be used for future annu	al report notification	n)
For further information concerning this matte	r, please call:		
Patrick Gurley		352- at	494-7276
(Name of Contact	ct Person)		(Daytime Telephone Number)
Enclosed is a check for the following amount	made payable to the Flo	rida Department of	State:
\$35 Filing Fee \$43.75 Filin Certificate o		opy is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		Street Address Amendment Sec	tion
Division of Corporations		Division of Corp	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

5000 NW Professional Center Condominium Association	ı Inc.	FILED
(Name of Corporation as cur	rrently filed with the Florida Dept. of	State)
NO1834		2016 DEC 13 P 4: 00
(Document N	umber of Corporation (if known)	tain occ 13 12 tt: 00
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not For Profit Cal</i>	SECRETARY OF STATE POLICE PROPERTY OF STATE
A. If amending name, enter the new name of the corpo	oration:	
N/A		am
name must be distinguishable and contain the word "corp	poration" or "incorporated" or the abb	The new previation "Corp," or "Inc."
"Company" or "Co." may not be used in the name.	•	•
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRE</u>	E <u>SS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5000 NW 27th Court, Suite B	
	Gainesville, Fl, 32606	
D. If amounting the product of a control of the con	-60 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		ame of the
	k Gurley	
no ch	ange	
New Registered Office Address:	(Florida street ada	tress)
	(City)	, Florida (Zip Code)
	(0,0)	(Lip Coul)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent: m familiar with and accept the obligation	ons of the position.
	fall who	
	Signature of New Registered Agent,	if changing

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 X Remove X Add	PT John Do Y Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VD	Michael Sawyer	5000 NW 27th Court, Suite D
Add X Remove			Gainesville, Fl, 32606
2) Change	PD	William DeCarlis	5000 NW 27th Court, Suite D
Add X			Gainesville, Fl. 32606
Remove $\frac{X}{X}$ Change	VD	Pasquale W. DeCarlis	1721 NW 68th Terrace
Add			Gainesville, Fl, 32605
Remove			
4) Change	PD	Brandon Gurley	5000 NW 27th Court, Suite B
X Add Remove			Gainesville, Fl, 32606
5) Change	STD	Patrick Gurley	5000 NW 27th Court, Suite B
X Add			Gainesville, Fl, 32606
Remove			
6) Change		·	
Add			
Remove		.	

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
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Market All Andrews Constitution of the Constit	, , , , , , , , , , , , , , , , , , ,
Attached to a state of the second	<u> </u>
V	

Th	e date of each amendment(s) adoption:,	if other than the
dat	te this document was signed.	
Eff	January 1, 2017 fective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.	listed as the
Ad	loption of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
8	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated December 9, 2016	
	Signature Tasquale W. De Carlis	
	(By the chafman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Pasquale W. DeCarlis	
	(Typed or printed name of person signing)	
	VD	
	(Title of person signing)	