

FROM: LAZARUS  
Division of Corporations

FAX NO. : 3052201440

SEP 26 2006 03:12PM P1

**P04000007384**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000237089 3)))



H060002370893ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

06 SEP 26 AM 9:12  
FILED  
SECRETARY OF STATE  
TAMPA, FLORIDA

To: Division of Corporations  
Fax Number : (850)205-0380

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**

**HEALTH SOLUTIONS MEDICAL SUPPLIES INC.**

RECEIVED  
06 SEP 26 AM 8:00  
DIVISION OF CORPORATIONS

*Amerel  
Tullis*

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

FROM : LAZARUS

FAX NO. : 3052201440

Sep. 26 2006 03:13PM P2

850-205-0381

9/26/2006 3:55 PAGE 001/001

Florida Dept of State



September 26, 2006

FLORIDA DEPARTMENT OF STATE

Division of Corporations

HEALTH SOLUTIONS MEDICAL SUPPLIES INC.

2055 SW 122 AVE.

111

MIAMI, FL 33175

SUBJECT: HEALTH SOLUTIONS MEDICAL SUPPLIES INC.

REF: P04000007384

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

There should be a period in the present name of the corporation after Inc.

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) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

FAX Aud. #: H06000237089  
Letter Number: 506A00057380

FROM : LAZARUS

FAX NO. : 3052201440

Sep. 26 2006 03:13PM P3

**H06000237080**

FILED

06 SEP 26 AM 9:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

**HEALTH SOLUTIONS MEDICAL SUPPLIES INC.**

(PRESENT NAME)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the followings articles of amendment to its of incorporation:

**FIRST:** Amendment(s) adopted : (indicate article number(s) being amended, added or deleted)

**ARTICLES VI DIRECTORS(S)**

**LOURDES MENENDEZ**, 175 FONTAINEBLEAU BLVD. SUITE 1P, MIAMI, FLORIDA. 33172  
Vice President and Director ( **ADD** )

**PRINCIPAL ADDRESS AND MAILING ADDRESS**

-- 2056 SW 122 AVE. # 111, MIAMI, FLORIDA. 33175. ( **DELETED** )

-- 175 FONTAINEBLEAU BLVD. SUITE 1P, MIAMI, FLORIDA. 33172 ( **ADD** )

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows

**THIRD:** The date of each amendment's adoption: September 25, 2006

**H06000237080**

H0600023708W

**FOURTH: Adoption of Amendmegt(s) (check one)**

- The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval
- The amendment(s) was/were approved by shareholders through voting groups.

The following statement must be separately for each voting group entitled to vote separately on each 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.

Signed this 25 day of September, 2006

Signature \_\_\_\_\_  
(By the Chairman or Vice Chairman of the directors, President or other officer if adopted by the shareholders)

OR  
(By Director if adopted by the directors)

OR  
(By an incorporator if adopted by the incorporators)

VLADIMIR PIETRO

\_\_\_\_\_  
(Typed or printed name)

PRESIDENT

\_\_\_\_\_  
(Title)

Having been named as registered agent and to accept service of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

\_\_\_\_\_  
(Registered Agent Signature)

H0600023708W