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## COR AMND/RESTATE/CORRECT OR O/D RESIGN DADE MEDICAL GROUP INC.

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Corporate Filing Menu

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## P. 002/004

## Articles of Amendment

to	A.			
Articles of Inco	rnoration (**)			
Al dixes of file	IP INC the Florida Dept. of State)			
DADE MEDICAL GROUP INC				
(Name of Corporation as currently filed with the Florida Dept. of State)				
(Decument Number of Corporation (if known)				
	, -			
tursuant to the provisions of section 607.1006, Florida Statut mendment(s) to its Articles of Incorporation:	es, this Flortda Profit Corporation adopts the fol			
L If amending name, enter the new name of the corporation	<u>n:</u>			
	The new			
ame must be distinguishable and contain the word "corp bbreviation "Corp.," "Inc.," or Co.," or the designation "Coame must contain the word "chartered," "professional associa	orp, " "Inc." or "Co". A professional corporation			
Enter new principal office address, if applicable:				
	782 N.W. 42nd AVE STE 439			
	782 N.W. 42nd AVE STE 439 MIAMI FL 33126			
Principal office address MUST BE A STREET ADDRESS)  Left the mailing address, if applicables	MIAMI FL 33126			
Principal office address <u>MUST BE A STREET ADDRESS</u> )				
Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:	MIAMI FL 33126  782 N.W. 42nd AVE STE 439			
Principal office address <u>MUST BE A STREET ADDRESS</u> )  C. Enter new mailing address, if applicable:	MIAMI FL 33126			
Principal office address MUST BE A STREET ADDRESS )  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address registered agent and/or registered office address registered agent and/or registered office address registered agent and/or the new registered agent ag	MIAMI FL 33126  782 N.W. 42nd AVE STE 439  MIAMI FL 33126  address in Florida, enter the name of the			
Principal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office	MIAMI FL 33126  782 N.W. 42nd AVE STE 439  MIAMI FL 33126  address in Florida, enter the name of the			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent:	MIAMI FL 33126  782 N.W. 42nd AVE STE 439  MIAMI FL 33126  address in Florida, enter the name of the			
Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:	MIAMI FL 33126  782 N.W. 42nd AVE STE 439  MIAMI FL 33126  address in Florida, enter the name of the dress:  Idu street address)  Florida			

Signature of New Registered Agent, if changing

ii amendi	ng the Officers and/or Directors, en	Office to the Director Live	olitoer/director being
Cellinaer og	and title, name, and address of each ditional sheets, if necessary)	Citieer and or Director being	(added:
(минел ни	amonai sneets, y necessary)		•
Title	Name	Address	Type of Action
		<del></del>	D Add
			🗖 Add
			<del></del>
			🗀 Remove
		•	
E. <u>If ame</u>	ding or adding additional Articles.	enter change(s) here:	
(Bitach	additional sheets, if necessary). (Be	specific)	
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	,		
	•	<del></del>	
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<b></b>			
F. Hans	mendment provides for an exchang tions for implementing the amendm	e, reclussification, or capcellar	tion of issued shares,
(if	not applicable, indicate N/A)	ent it not contained in the ame	nament usen:
15			
			<u> </u>
<u> </u>	<u> </u>		
<u> </u>			
			···

The date of each amendmen	t(s) adoption: <u>03/02/201</u>	0
Effective date if applicable:	04/01/2010	
	(no more than 90 days af	ter amendment file date)
Adoption of Amendment(s)	(CHECK O	<u>ir</u> )
	ere adopted by the sharehol vere sufficient for approval.	ders. The number of votes cast for the amendment(s)
The amendment(s) was/wind must be separately provide	ers approved by the sharehold for each voting group en	olders through voting groups. The following statemential to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s)	was/were sufficient for approval
by	100%	
<b>,</b>	(voting group)	<del></del> -
action was not required.  The amendment(s) was/waction was not required.	sre adopted by the incorpor	ators without shareholder action and shareholder
Dated	03/02/2010	
Signature _ Ri	y a director president or of	her officer - if directors or officers have not been
60]		if in the hands of a receiver, trustee, or other court
		IARIA C VITAL
	(Typed or pr	domed name of person signing)
	(Title of person	PRESIDENT
	form to horses	