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9/14/11

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: NEM ESIS Medical 61049 BAL 110000040157 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Demesis Medical Group and 782 pw 42 ave + 639 MIAMI R 33126 For further information concerning this matter, please call: Mail a Ornz at (305) 476 8233

Name of Contact Person at (305) 476 8233

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314-

P:O:Box 6327

Articles of Amendment to

Articles of Incorporation

•	of	or horamon	FILEU	
Nemesis	Medical	Broup'	. 02313 AM 8: 52	2
		the Florida Dept	LOPSIARE TARY DE STATE	; -
PU	0000040	15/	SECRETARY OF STATE TALLAHASSEE FLORIS):

amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name o	f the corporation:
	The new
abbreviation "Corp.," "Inc.," or Co.," or the	the word "corporation," "company," or "incorporated" or the edesignation "Corp," "Inc," or "Co". A professional corporation of sessional association." or the abbreviation "P.A."
B. Enter new principal office address, if app	olicable:
(Principal office address MUST BE A STREE	
	<u> </u>
C. Enter new mailing address, if applicable	• •
(Mailing address <u>MAY BE A POST OFFI</u>	
•	
	registered office address in Florida, enter the name of the
new registered agent and/or the new regi	stered office address:
Name of New Registered Agent:	Marta Orni
	782 NW 42 ave +639
New Registered Office Address:	(Florida street address)
	Mi'AMI', Florida 33126
	MI'AMI', Florida 331240
	(City) (Zip Code)
New Registered Agent's Signature, if changing	ng Registered Agent:
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as	ng Registered Agent: 1 am familiar with and accept the obligations of the position.

Page 1 of 3

ending the Officers and/or Directors, enter the title and name of each officer/director being loved and title, name, and address of each Officer and/or Director being added:

Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
_ρ	Maria Palavios	6886 w 29 avc thaleah fi 33018	☐ Add ☑ Remove
ρ	Maria Ortiz	782 UW 42 AVE Suite 639 MIAMI R 33126	☑ Add □ Remove
UP	Maria Ortiz	8940 NW 8 OT PEMBOOLING, IL 33024	☐ Add ☑ Remove
	additional sheets, if necessary). (Be spec		
provis	mendment provides for an exchange, residence for implementing the amendment in not applicable, indicate N/A)		
			

The date of each a	mendment(s) adoption:
Effective date <u>if ar</u>	oplicable: Odate of adoption is required)
•	, (no more than 90 days after amendment file date)
Adoption of Amen	dment(s) (<u>CHECK ONE</u>)
	(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.
	(s) was/were approved by the shareholders through voting groups. The following statement ely provided for each voting group entitled to vote separately on the amendment(s):
"The numb	er of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
•	(voting group)
The amendment action was not r	(s) was/were adopted by the board of directors without shareholder action and shareholder equired.
The amendment action was not r	(s) was/were adopted by the incorporators without shareholder action and shareholder equired.
Д	Pated 09/01/2011
S	ignature (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)
	(Typed or printed name of person signing)
·	(Title of person signing)