## P95000000 454

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: EXCEL Medical Electronics Inc					
DOCUMENT NUMBER: P95000000 454					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
John Hoftman					
Name of Contact Person					
Excel Medical Electronics Inc					
Selfo COD FEED TORRED					
SOI Maple Woods Dr # 26					
Jupiter FL 33458 City/State and Zip Code					
Je hoffman. 2020 @ gmail. (om E-mail address: (to be used for future almual report notification)					
E-mail address: (to be used for future amoual report notification)					
For further information concerning this matter, please call:					
John Hoffman  at (576) 427 5829  Name of Contact Person  Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					
Amendment Section Amendment Section					
Division of Corporations  Division of Corporations					
P.O. Box 6327 The Centre of Tallahassee					

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment

to of Incorpora

Articles of Incorporation

of

EXCEL Medical Electroni (Name of Corporation as currently f	cs Inc
	iled with the Florida Dept. of State)
P9500000454	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
EME Holdings Inc	The new
name must be distinguishable and contain the word "corporation," "cor" Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A particle of the professional association, "or the abbreviation "P.A."	professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	Jupiter Fl 33458
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as above
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	Florida
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of Now Page	istored Agent it 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)

Example:

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.

X Change	PT	John Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>N</u> an	<u>ne</u>		Address
1) Change					
Add					
Remove					
2) Change					
Add					
Remove Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change				_	
Add					
Remove					

Attach additional sheets, if necessary).	(Be specific)	
		_
	**	
<del></del>		
	-	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(i) not appretante, material (vizi)		
		·_
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		_
_		

The date of each amendment(s) adopt	ion: 1/2-2/20	, if other than the
date this document was signed.		, 2002,
Effective date <u>if applicable</u> :		
<del></del>	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, ment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the amendent for approval.	lment(s)
	ed by the shareholders through voting groups. The following so it voting group entitled to vote separately on the amendment(s	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) is/are being filed [	pursuant to s. 607.0120 (11) (e), F.S.	
action was not required.	by the incorporators, or board of directors without sharehold	er action and shareholder
Dated \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2/20	
Signature	1 Lolmw	
selected, by	or president or other officer – if directors or officers have not an incorporator – if in the hands of a receiver, trustee, or oth iduciary by that fiduciary)	
	Tohn Hoffman (Typed or printed name of person signing)	
	President	

(Title of person signing)