

# P93000056620

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## BASIC AMENDMENT

**BEST CARE DURABLE MEDICAL EQUIPMENT INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

BEST CARE DURABLE MEDICAL EQUIPMENT INC.

The articles of incorporation of BEST CARE DURABLE MEDICAL EQUIPMENT INC., were amended by the corporation's board of directors on April 4, 2005. The corporation is filing these articles of amendment to articles of incorporation pursuant to F.S. 607.0602.

1. Article VI (REGISTERED AGENT AND STREET ADDRESS) of the articles of incorporation of BEST CARE DURABLE MEDICAL EQUIPMENT INC., was amended as follows:  
The name and address of the registered agent is:

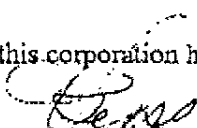
OVEDIO GIL BETANCOURT  
6595 NW 36<sup>TH</sup> STREET, SUITE 119  
MIAMI, FL 33166

2. Article VII (DIRECTOR) The name and street address of the director to these articles of incorporation is:

OVEDIO GIL BETANCOURT  
6595 NW 36<sup>TH</sup> STREET, SUITE 119  
MIAMI, FL 33166

3. The foregoing amendment to articles of incorporation was duly adopted by the board of directors on April 4, 2005, without shareholder action and shareholder action was not required.

In witness whereof, the undersigned Director of this corporation has executed these articles of amendment on April 4, 2005.

  
\_\_\_\_\_  
LUISA F. GRASS  
6450 EAST 4<sup>TH</sup> AVENUE  
HIALEAH, FL 33013

  
\_\_\_\_\_  
OVEDIO GIL BETANCOURT  
6595 NW 36<sup>TH</sup> STREET, SUITE 119  
MIAMI, FL 33166

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Best Care Durable Medical Equipment  
(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

  
\_\_\_\_\_  
REGISTERED AGENT

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