## N040000916/

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: Citrusmed	d, Inc.	
DOCUMENT NUMBER: NO400009	161	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Mario E. Jardon		
	(Name of Contact Perso	n)
Citrusmed, Inc.		
Printed	(Firm/ Company)	
4175 West 20th Avenue		
	(Address)	
Hialeah, Florida 33012		
	(City/ State and Zip Cod	le)
mario@citrusheal	th.com	
E-mail address: (to be used	•	notification)
For further information concerning this matter, please	call:	
Maria A. Alonso	<sub>at (</sub> 305	,424-3100
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address dment Section on of Corporations a Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

2014 JAN -6 PM 3: 28

(Name of Corporation as currently filed with the Fl	lorida Dept. of State)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Citrusmed, Inc.		TALLAHASSEE, FLORIDA
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this Florida Not For Prof	it Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
n/a		The new
name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name.	ation" or "incorporated" or to	te abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	n/a	
Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	
). If amending the registered agent and/or registered off	ice address in Florida, enter	the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
n/a		
(City		Florida(Zip Code)
•		(Zip Coae)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for		ligations of the position.
Signature of New	Registered Agent, if changing	2

Page 1 of 4

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)

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.

Example:  X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CD	Jorge Forte	4175 West 20th Ave
Add			Hialeah, Florida 33012
X Remove			<del></del>
2) X Change	CD	Maria T. San Juan	4175 West 20th Ave
Add			Hialeah, Florida 33012
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			1
Remove			
5) Change	<del></del>		
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
n/a	
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· <del></del>	
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The date of each amendme		, if other than the
ate this document was signed.  Iffective date if applicable: 8/6/2013		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s	) ( <u>CHECK ONE</u> )	
The amendment(s) was was/were sufficient for	/were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.	
Dated	~1 1/18/13	
Signature	Vano Jaskan	
hav	the chairman or vice chairman of the board, president or other officer-if directors e not been telected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
Mario	E. Jardon	
	(Typed or printed name of person signing)	
Pres	ident and CEO	
	(Title of person signing)	