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то:	Amendment Section Division of Corporations		
SUBJ	ECT: Florida Keys Health-Tec, Inc.	(Name of Corporation)	
$\dot{\mathbf{DOC}}$	UMENT NUMBER: F98000002711		
	nclosed Resolution of the Board of Die submitted for filing.	irectors to Change the Alternate name for use in Florida an	d
Please	e return all correspondence concerning	this matter to the following:	
Diane	Scudder (Name of Contact Person)		
Florida	a Keys Health-Tec, Inc. (Firm/Company)	<u> </u>	
92330	Overseas Highway Suite 103 (Address)		
Taver	nier, FL. 33070		
	(City/State and Zip Code)		
For fi	orther information concerning this mate	ter, please call:	
Diane	Scudder (Name of Contact Person)	at (305) 853-7264 (Area Code & Daytime Telephone Number)	
Enclo	sed is a check made payable to the Flo	orida Department of State for the following amount:	
	\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
Divis	ng Address: Idment Section Idmon of Corporations Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO CHANGE THE ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Diane Scudder	, do hereby certify
(Name)	
that this Resolution of the Board of Directors of Florida Keys Health-Te	ec, Inc.
Florida Keys Health-Tec, Inc.	
(Name of Corporation)	
a corporation duly organized and existing under the laws of <u>Florida</u> (State	e or Country)
was adopted on April 29, 2009	, changing the alternate
name in Florida from <u>Florida Keys Health-Tec, Inc.</u>	t
(Current Alternate Name)	
Health-Tec, Inc.	,
(Alternate Name) NOTE: Must contain a co	rporate suffix
and its real name is unavailable in Florida.	
Date: April 29, 2009	
PTSD_	
Signature of Chairman, Vice Chairman of the Board, a director or any officer	Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and mail to: •

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314