P000009057

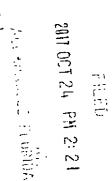
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR		DIAGNOSTIC, INC.	
DOCUMENT NUMBI	ER: P00000009057		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	STACY TARAKOFSKY		
_		Name of Contact Person	n
-		Firm/ Company	
·	6093 NW 62 TERR		
_		Address	
I	PARKLAND, FL 33067		
_		City/ State and Zip Cod	e
stacyt(@sdinow.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
STACY TARAKOFSK	ζΥ	954 at (578-4000
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Divis	ion of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314			Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SWALLOWING DIAGNOSTIC, INC.

FILED 2017 OCT 24 FH 2: 21

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P0000009057	*3 ¹
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered." "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	6093 NW 62 TERR
(Principal office address MUST BE A STREET ADDRESS)	
	PARKLAND, FL 33067
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	6093 NW 62 TERR
	PARKLAND, FL 33067
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	
Signature of New	Registered Agent, if 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)

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	DEBRA TARAKOFSKY	6093 NW 62 TERR
Add Remove			PARKLAND, FL 33067
2) Change	VP	STACY TARAKOFSKY	6093 NW 62 TERR
X Add			PARKLAND, FL 33067
3) Change Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add Remove			
6) Change			
Add			
Kemove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
THE CORPORATE ADDRESS IS BEING CHANGED TO 6093 NW 62 TERR, PARKLAND, FL 33063
THE CORPORATE ADDRESS IS BEING CHANGED TO 0093 KW 02 TERR, TARREAND, TC 33003
THE PRESIDENT OF THE CORPORATION IS BEING CHANGED TO DEBRA TARAKOFSKY:
THE VP TO STACY TARAKOFSKY
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

	09/20/2017	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
09	0/20/17	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	 .
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated	1) Mules X	
seleç	director, president or other office— if directors or officers have not been ted, by an incorporator—if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	V Stacy Tarakofsky	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	