

P00000010947

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EXPRESS CORPORATE FILING SERVICE, INC

(Requestor's Name)

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CORAL GABLES, FL 33134 (305)444-4994

(City, State, Zip)

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OFFICE USE ONLY

FILED
00 MAR -7 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. E.M. Home Medical Equipment, Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in ☒ Pick up time _____

☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

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-03/03/00--01076--004

*****35.00 *****35.00

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

C. COULLETTE MAR 07 2000

RECEIVED
00 MAR -3 AM 11:23
DEPARTMENT OF STATE
DIVISION OF CORPORATE REG.
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 3, 2000

EXPRESS CORPORATE FILING SERVICE, INC.

TALLAHASSEE, FL

SUBJECT: E.M. HOME MEDICAL EQUIPMENT, INC.
Ref. Number: P00000010947

We have received your document for E.M. HOME MEDICAL EQUIPMENT, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 900A000120

RECEIVED
00 MAR -7 AM 11:03
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLE OF INCORPORATION
OF

FILED
MAR - 7 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. M. HOME MEDICAL EQUIPMENT, INC
(Present Name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts
The following articles of amendment to its articles of incorporation:

FIRST:

Amendment(s) adopted:

(indicate article number(s) being amended,
added or deleted)

ARTICLE VI

ADD: TITLE D.P.V.
ENRIQUE MILLA
1191. N.W. 8. ST. RD. #3
MIAMI. FL. 33136

REMOVE: TITLE D.P.V.
DORFIRIO MILLA
1191. N.W. 8 ST. RD #3
MIAMI, FL. 33136

SECOND:

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, are as follows:

THIRD: The date of each amendment's adoption: 3/1/2000

FOURTH: Adoption of Amendment(s) (check one)

☐ the amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ the amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____"
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 1 day of MARCH 19 2000

Signature [Signature]
(By the Chairman or Vice Chairman of the Board of Directors,
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

PORFIRIO MILLA
(Typed or Printed Name)

PRESIDENT-incorporator
(Title)