

P0000053530

Florida Department of State

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000237171 2)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

RECEIVED
02 DEC 13 PM 1:07
DIVISION OF CORPORATIONS

FILED
02 DEC 13 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BASIC AMENDMENT

MP MEDICAL EQUIPMENT CORP.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

AMENDED
12/13/02



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

December 13, 2002

MP MEDICAL EQUIPMENT CORP.
3383 N.W. 7TH ST
#303
MIAMI, FL 33125

SUBJECT: MP MEDICAL EQUIPMENT CORP.
REF: P00000053530

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6906.

Darlene Connell
Document Specialist

FAX And. #: H02000237171
Letter Number: 502A00065965

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

MP Medical Equipment Corp.

MP Medical Equipment Corp.

(present name)

P00000053530

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit 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)*

Remove Registered Agent Leticia Perdomo
3383 NW 7 Street - Suite 303
Miami, FL 33125

Remove President - Director Carlos A Ortega
3383 NW 7 Street - Suite 303
Miami, FL 33125

Add President - Director Ana Rosa Viera
2060 SW 3 Street
Suite 1
Miami, Florida 33135

Add Registered Agent Ana Rosa Viera
2060 SW 3 Street
Suite 1
Miami, Florida 33135

FILED
02 DEC 13 PM 3:08
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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: 12/11/2002

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 11 day of December, 2002

Signature


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

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change

Ana Rosa Viera

(Typed or printed name)

President / Registered Agent

(Title)