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Florida Department of State

Division of Corporations

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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
05 AUG 15 AM 8:00
DIVISION OF CORPORATIONS

BASIC AMENDMENT

DOCTORS HEALTH GROUP N.W. INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$35.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 AUG 15 PM 3:06

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Amendment
08/15/05
DC

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Articles of Amendment
to
Articles of Incorporation
of

DOCTORS HEALTH GROUP N.W. INC.
(Name of corporation as currently filed with the Florida Dept. of State)

P00000028930
(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

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DIVISION OF CORPORATIONS

Delete: Elba M. Mor (P)(RA)
2741 SW 136 Ave
Davie, Fl 33330

ADD: Angel F Mendez (P)(RA)
1051 W. 29 St ste 3
Hialeah Fl 33012

See attached for Registered Agent Acceptance:
(Attach additional pages if necessary)

If an amendment provides for 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)

Angel F. Mendez - 100% Shares

FEI # 650485918

(continued)

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Doctors Health Group NW Inc / Angel F. Mendez MD

August 12, 2005

Acknowledgement, having been named to accept service of process for the above stated corporation, at the place designated in the certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said act relative to keeping open said office.

By:
Angel F. Mendez MD
1051 W 29 ST #3
Hialeah, Fl 33012

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The date of each amendment(s) adoption: 08-12-05

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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 eight day of 12 2005.

Signature _____
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee or other court appointed fiduciary by that fiduciary)

ELBA M. MOA
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)