Principal Place of Business 1501 NORTHPOINT PKWY. 5841 Corporate STE. 100 200 WEST PALM BEACH FL 33407				Mailing Address 1501 NORTHPOINT PKWY. 5841 Corporate STE. 100-200 WEST PALM BEACH FL 33407				TOO TOO O						
2. Principal Place of Business														
z. Frincipal Place of Business				3. Mailing Address					***************************************					***************************************
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State				& State			4. FE	El Number	52-2278	926			oplied For ot Applicable	
Zip Country			Zip Co			ntry 5. C			ertificate of S	Status Desir	ed		8.75 Add	ditional
	6. Name	and Address of Current R	egistere	ed Agent		7. Name and Address of New Registered Agent								
						Name	Name							
MAZORRA, SHERRY						Street A	ddress (P	2.O. Box	x Number is	Not Accep	table)			
5841 CORPORATE WAY							`			,				
SUITE 200														
WEST PAI	LM BEACH			City						FL	Zip Cod	e		
8. The above	named entity	y submits this statement for	the purp	ose of changing its	registere	ed office or	registere	ed ager	nt, or both, ir	the State	of Florida	. –	niliar with,	and accept
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SIGNATURE .														
OIOI II OI IE	Signature, typed	or printed name of registered agent an	d title if app	licable. (NOTE	: Registere	d Agent signat	ure required v	when reins	nstating)			DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State										n Campaig und Contril		ing 🔲		May Be I to Fees
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12. I hereby of indicated	certify that the	information supplied with the tor supplemental report is to	nis filing	does not qualify for	the exer	nption stature shall be	ed in Sec	tion 11	19.07(3)(i), Fl	orida Statu	tes. I furt	her certify	that the in	formation

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

2003 FOR PROFIT CORPORATION

P00000104273

UNIFORM BUSINESS REPORT (UBR

GOLDSHIELD MANAGEMENT SERVICES

GOLDSHIELD HEALTHCARE DIRECT, INC. - 17 OW

DOCUMENT #

1. Entity Name

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF GOLDSHIELD HEALTHCARE DIRECT, INC.

Pursuant to the provisions of Section 607.1006 of the Florida Statutes, the undersigned corporation adopts these Articles of Amendment to its Articles of Incorporation:

1. Article 1 of the Articles of Incorporation of Goldshield Healthcare Direct, Inc., a Florida corporation, is hereby amended to read as follows:

"Article I"

NAME:

The name of this corporation is:

Goldshield Management Services, Inc.

The address of the principal office of this corporation is 5841 Corporate Way, Suite 200, West Palm Beach, Florida 33407 and the mailing address of this corporation is as follows:

Goldshield Management Services, Inc. c/o Thomas J. Skola, Esq. Whisenand & Turner, P.A. 501 Brickell Key Drive, Suite 602 Miami, FL 33131

2. The foregoing amendment is made and adopted as of the date hereof by the sole shareholder and the directors of the corporation pursuant to a Unanimous Consent Action, a copy of which is attached hereto.

IN WITNESS WHEREOF, the undersigned-officers-of-the corporation-have executed-these Articles of Amendment as of this http://day.of.november, 2002.

Goldshield Healthcare Direct, Inc.

Ajit Patel, as President

William E. Hudson

Secretary