Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

Fax Number : (850)205-0380

Account Name : NATIONS BUSINESS CENTER, INC.

Account Number : I20000000238 Phone : (305)591-9448 Fax Number

: (305)591-4258

### BASIC AMENDMENT

MANAGEMENT FOR HEATH CARE SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$43.75

10/30/01

October 31, 2001

MANAGEMENT FOR HEALTH CARE SERVICES, INC. PO BOX 667714 MIAMI, FL 33166

SUBJECT: MANAGEMENT FOR HEALTH CARE SERVICES, INC.

REF: P01000022681

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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

Our records reflect the OFFICERS/DIRECTORS should be listed under Article V and the REGISTERED AGENT should be listed under Article VI. Please correct your document accordingly.

Please provide the title of the officers listed under ARTICLE V.

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 Corporate Specialist FAX Aud. #: H01000111151 Letter Number: 501A00059575

# (HO10001111514)

#### ARTICLES OF AMENDMENT

# TO ARTICLES OF INCORPORATION OF MANAGEMENT FOR HEALTH CARE SERVICES, INC. (Present name)

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

FIRST: Amendment(s)adopted(indicate article number(s)being amended, added or delete)

Article 5 The name and address of Officer and Director is: Cindia Mestas, President

Article 6-The name and address of the new Registered Agent shall be:
Cindia Mestas
1101 SW 94<sup>th</sup> Avenue
Miami, FL 33174

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 adoption 10/30/01

FOURTH: Adoption of Amendment (s) (CHECK ONE)

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.,	
X 	The amendment(s) was/were approved by the shareholders. The number of voted 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 east for the amendment(s) was/were sufficient for approval by
•	Voting group
action :	The amendment(s) was/were adopted by the board of directors without shareholder and shareholder action was not required.
and sha	The amendment(s) was/were adopted by the incorporators without shareholder action were not required.
	Signed this 30 day of Ottober , 2001.
	y accept and familiar with and accept the duties and responsibilities as Registered
Agent. Signatu	/ / OM +
	Chairman or Vice Chairman of the Board of Directors, President or other Officer
,	OR
	(By a director if adopted by the directors)
	OR
	(By an incorporator if adopted by the incorporators)
	Cindia Mestas
	<b>7</b> . 11. <i>c</i>

Title

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