

PO1000028664

Requester's Name

BARRINGTON G. COOMBS & ASSOCIATES, P.A.
CERTIFIED PUBLIC ACCOUNTANT
5040 NW 7 ST., SUITE 412, Miami FL 33126
(305) 443-3909, FAX (305) 443-2390

Office Use Only

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

- 1. _____
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

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

- Walk in
- Mail out
- Pick up time
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

02 APR - 8 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 20, 2002

BARRINGTON G. COOMBS & ASSOCIATES, P.A.
5040 NW 7 STREET, SUITE 412
MIAMI, FL 33126

SUBJECT: PREFERRED HEALTH CENTER, INC.
Ref. Number: P01000028664

We have received your document for PREFERRED HEALTH CENTER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

— Please list the street address of each officer/director.

— The date of adoption of each amendment must be included in the document.

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) 245-6869.

Teresa Brown
Corporate Specialist

Letter Number: 002A00016662

RECEIVED
02 APR -8 AM 11:31
DIVISION OF CORPORATIONS

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

FILED
02 APR -8 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PREFERRED HEALTH CENTER, INC.

(PRESENT NAME)

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) *on 2/26/02:*

Article # Directors

	<u>TITLE</u>	<u>ADDRESS</u>
ADD: Lucia Sanchez	President	3628 NW 7 ST Miami FL 33125
DELETE: MARIA OTANO	PRESIDENT	

Article # New Registered Agent

ADD: LUCIA SANCHEZ — 3628 NW 7 ST, miami FL 33125

DELETE: MARIA OTANO

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: 2-26-02

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 for each voting group entitled to vote separately on each 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 26 day of FEBRUARY, 2002

Signature x



(By the Chairman or Vice Chairman of the 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)

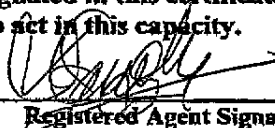
MARIA OTANO

Typed or printed name

PRESIDENT

Title

Having been named as registered agent and to accept service of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.



LYCIA SANCHEZ

Registered Agent Signature