

PO1000043643

Requester's Name

HEALTHRIGHT INC.
1414 NW 107 AVE
MIAMI FL 33175

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 #)

600004691036--4
-11/21/01--01056--009
*****35.00 *****35.00

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 NOV 21 AM 11:42

RA Change

Examiner's Initials

10

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : Ameridiagnostics, Inc.

2. The mailing address of the corporation : 1414 NW 107 Ave (Ste 310)
Miami, FL 33172

3. Date of incorporation/qualification: 05/01/2001 Document number: PO1000043643

4. The name and address of the current registered agent and office:

Evelyn Medina
1414 NW 107 Ave (310)
Miami, FL 33172

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P. O. Box Not Acceptable)

Guillermo Ortiz
1414 NW 107 Ave (310)
Miami, FL 33172

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

(Date)

Guillermo Ortiz
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Guillermo Ortiz
(Typed or Printed Name)

President
(Capacity)

* * * FILING FEE: \$35.00 * * *

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
NOV 21 AM 11:43