

POKODS 3320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

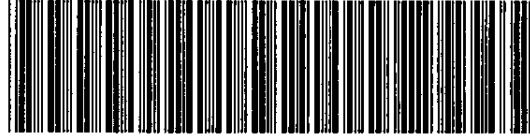
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Check box
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Office Use Only



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09/01/15--01029--012 **52.50

FILED
15 SEP 25 PM 2:31
TALLAHASSEE, FLORIDA

SEP 28 2015

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 4, 2015

JESUS BARRAQUE
6100 BLUE LAGOON DR #450
MIAMI, FL 33126

SUBJECT: AVISENA, INC.
Ref. Number: P01000053320

RECEIVED SEP 23 2015

We have received your document for AVISENA, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please sign the document on the signature line on page 4.

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) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 015A00018832

RECEIVED
15 SEP 25 PM 4:08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AVISENA, INC.

DOCUMENT NUMBER: PO1000053320

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESUS BARRAQUE

Name of Contact Person

AVISENA, INC.

Firm/ Company

6100 BLUE LAGOON DRIVE # 450

Address

MIAMI FLORIDA

City/ State and Zip Code

jbarraque@avisena.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESUS BARRAQUE

at (786)

6213822

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☒ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

AVISENA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

PO1000053320

(Document Number of Corporation (if known))

FILED
15 SEP 25 PM 2:31

SEAL NOTED
TALLAHASSEE, FLORIDA

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

A. If amending name, enter the new name of the corporation:

MEDUSIND OF MIAMI, INC

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

NA

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

NA

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

NA

(Florida street address)

New Registered Office Address:

Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

PCEO

RADIGAN, JOSEPH

6100 BLUE LAGOON

☐ Add

DR. #450 MIAMI

☒ Remove

FL - 33126

2) ☐ Change

CFO

GNISCI, FRANK J

6100 BLUE LAGOON

☐ Add

DR. #450 MIAMI

☒ Remove

FL - 33126

3) ☐ Change

D

DOYLE, WILLIAM

6100 BLUE LAGOON

☐ Add

DR. #450 MIAMI

☒ Remove

FL - 33126

4) ☐ Change

D

LANGLOSS, TIM

6100 BLUE LAGOON

☐ Add

DR. #450 MIAMI

☒ Remove

FL - 33126

5) ☐ Change

D

TOMAS, MIGUEL

6100 BLUE LAGOON

☐ Add

DR. #450 MIAMI

☒ Remove

FL - 33126

6) ☐ Change

V

ASHLEY, KEITH

6100 BLUE LAGOON

☒ Add

DR. #450 MIAMI

☐ Remove

FL - 33126

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

CDPCE

BANSAL, VIPUL

6100 BLUE LAGOON

☒ Add

DR. # 450, MIAMI

☐ Remove

FL - 33126

2) ☐ Change

D

BECK, ROBERT

6100 BLUE LAGOON

☒ Add

DR. # 450, MIAMI

☐ Remove

FL - 33126

3) ☐ Change

SCFO

KAPADIA, DHIREN

6100 BLUE LAGOON

☒ Add

DR. # 450, MIAMI

☐ Remove

FL - 33126

4) ☐ Change

V

FONSECA, DESIREE

6100 BLUE LAGOON

☒ Add

DR. # 450, MIAMI

☐ Remove

FL - 33126

5) ☐ Change

V

LONIDIER, SUZANNE

6100 BLUE LAGOON

☒ Add

DR. # 450, MIAMI

☐ Remove

FL - 33126

6) ☐ Change

☐ Add

☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

NA

F. 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:
(if not applicable, indicate N/A)

NA

6TH AUGUST, 2015

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

6TH AUGUST, 2015

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted 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):

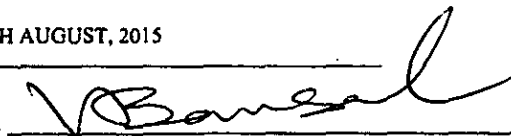
"The number of votes cast for the amendment(s) was/were sufficient for approval

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.

Dated 6TH AUGUST, 2015

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)

VIPUL BANSAL

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)