## P01000080805

(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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04/06/16--01014--016 \*\*25.00

04/27/16--01003--026 \*\*10.00



APR 27 2016 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: RADNAD, TNC.				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Picardo DE Cuba Name of Contact Person				
PADNAD, INC	·•			
11887 SW 13th CT				
Address	<del></del>			
Davie, FL 3332; City/ State and Zip Code				
E-mail address: (to be used for future annual report notific	ation)			
For further information concerning this matter, please call:				
	02/ 1270			
Richado DECibas at (305)	586-1330			
Name of Contact Person Area Code & D	Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
Certificate of Status Certified Copy Co (Additional copy is enclosed) (A	52.50 Filing Fee ertificate of Status ertified Copy additional Copy enclosed)			
Mailing Address Amendment Section  Street Addre				
Division of Corporations Division of C	orporations			
P.O. Box 6327 Clifton Build	ing			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301



April 8, 2016

RICARDO DECUBAS RADNAD, INC. 11887 SW 13TH CT DAVIE, FL 33325

SUBJECT: RADNAD, INC. Ref. Number: P01000080805

We have received your document for RADNAD, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

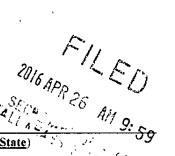
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 716A00007222

## **Articles of Amendment Articles of Incorporation**



700000 808d5	The state of the s
P& 1 abb 80805 (Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	Tri .
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Gword "chartered," "professional association." or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	11887 SW 13th CT Davie, FL 33325
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11887 SW 131 CT Davie, Fr 33325
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  Name of New Registered Agent	TE CUBEL
New Registered Office Address:  New Registered Office Address:	eet address)  Ne , Florida 33325  (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar to the signature of New Registered Agent.	Tith and accept the obligations of the position.

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: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	PSD MAria Lopez	7849 NW 1924 ST Miami, FL 33015
Add		Miami, FL 33015
Remove		
2)Change	GM Ricando DE Colons	11887 SW 13th GT Davie, FL 33325
Add		Davie, Fr 33325
Remove		
3) Change		<del></del>
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add	_	
Ramova		

Attach additional sheets, if necessary).	icles, enter change(s) here:  (Be specific)
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<u> </u>	
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isd waaridaa sa ay ay ay	hanne madesification or consulation of issued shapes
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	, , , , , , , , , , , , , , , , , , ,
·	

The date of each amendment(s) ad date this document was signed.	option:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing reartment of State's records.	equirements, this date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast ficient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. It each voting group entitled to vote separately on the	
"The number of votes cast	or the amendment(s) was/were sufficient for approx	⁄al
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action	n and shareholder
Dated	20/16	
Signature	rector, president or other officer - II directors or of	> ; :'
	rector, president or other officer — If directors or of l, by an incorporator — if in the hands of a receiver,	
appoint	ed fiduciary by that fiduciary)	· :
	Rivardo DECO	bg j.
	(Typed or printed name of person signir	g) :
	GM	· ·
	(Title of person signing)	<del>-</del>