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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: <u>///////</u>	HT MEDICA	AL DESIGNI INC
DOCUMENT NUMBER:	PO1000	09373L	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspond	dence concerning this ma	tter to the following:	
	FREDI	Name of Contact Person	1
	INSCGHT ME	DICAC DESIC	EN,INC
			GTON BEACH,
	BOYNTON	REACH FO	33426
	E mail address: (to be us	2 CO 9 M A 1 sed for future annual report	notification)
For further information cor	cerning this matter, pleas	se call:	
FREDDY L	EE	at (56/	de & Daytime Telephone Number
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
inclosed is a check for the	following amount made	payable to the Florida Depa	irtment 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		Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

P01000093731
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) tas Articles of Incorporation:
. If amending name, enter the new name of the corporation:
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."
8. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS FREDDY LEE 1502 SW 22NO AVE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) ROYNTON BEACH, FL 33426 ROYNTON BEACH, FL 33426 Flee 4 L(2@Gmail.Com
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 FREDDY (FF
1502 5W 22NO AVE (Florida street address) New Registered Office Address: BOYNTON BEACH (City) (City) (City) (City)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with 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 = ChiefExecutive 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: <u>X</u> Change	<u>PT</u> Joh	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		FREDDY LEE	1502 SW 2700 AVE
V Add			BOYNTON BOACH
Remove			FL, 33426
2) Change			_ .
Add			
Remove			
3.)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			18.1.
Remove			

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)	If amending or adding additional Articolatech additional sheets, if necessary).	(Be specific)	(5) Here.		
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	(if not applicable, indicate N/A)	-	, -		
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The date of each amendment(s) adoptate this document was signed.	ion: Syptember 12, 2018	, if other than the
•		
ffective date <u>if applicable</u> :	(no more than 90 days after amendmer	nt file date)
Note: If the date inserted in this block locument's effective date on the Depart	does not meet the applicable statutory filing rement of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte by the shareholders was/were suffic	by the shareholders. The number of votes east ent for approval.	for the amendment(s)
	ed by the shareholders through voting groups. The h voting group entitled to vote separately on the	
"The number of votes cast for	the amendment(s) was/were sufficient for approv	a!
by	(voting group)	"
	(voting group)	
The amendment(s) was/were adopte action was not required.	I by the board of directors without shareholder a	etion and shareholder
☐ The amendment(s) was/were adopte action was not required.	I by the incorporators without shareholder action	and shareholder
Dated <i>57-P</i> _	7 13, 2018	
Signature		<u>.</u>
	tor, president or other officer - if directors or off	
	y an incorporator – if in the hands of a receiver, t fiduciary by that fiduciary)	rustee, or other court
	EREDAY ICE	
	FREDDY LEE (Typed or printed name of person signing	3)
_	PRESIDENT	
	(Title of person signing)	

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