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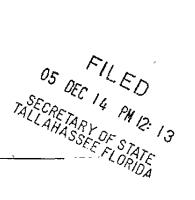
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: MIAMI-DADE	PAIN CENTER, INC.	•
DOCUMENT NUMBER: P02000003103	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
ANDRES W. LOPEZ (Name of C	ontact Person)	
THE TAX GROUP, INC.		
(Firm/)	Company)	•
1149 SW 27th AVE. SUITE	E 205	
MIAMI, FL. 33135	and Zip Code)	
For further information concerning this matter, ple	-	
ANDRES W. LOPEZ (Name of Contact Person) Enclosed is a check for the following amount:	at (305	•
EX \$35 Filing Fee & Certificate of Status	S43.75 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	Street Address Amendment Section Division of Corporations 409 E. Gaines Street	

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of



(continued)

N/A

The date of each amendment(s) adoption: NOVEMBER 1,2005
Effective date if applicable: NOVEMBER 1,2005
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signed this 10 day of DECEMBER , 2005.
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)
AIME DE LA ROSA (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35