

PD200009494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

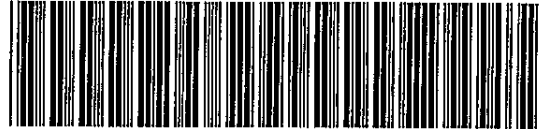
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/23/04--01051 --002 **43.75

FILED

04 MAY 26 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/27/04
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38

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Change Of Address And Correction Of EIN#

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Roberto F. Marrero
(Name of Person)

All Med Network Corporation
(Name of Firm/ Company)

2700 SW 3rd Avenue, Suite 2E
(Address)

Miami, Florida 33129
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Roberto F. Marrero _____ at (305) 859-9828
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 20, 2004

Roberto F. Marrero
All Med Network Corp
2700 SW 3rd Avenue, Suite 2E
Miami, FL 33129

SUBJECT: ALL MED NETWORK CORP
Ref. Number: P02000094942

We have received your document for ALL MED NETWORK CORP and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

I phoned on April 30 to try to correct the amendment and left a message. As I have had no further communication, I am returning the amendment.

Please check the appropriate adoption of the amendment. Also the date of adoption must be complete.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 504A00035444

FILED

to

Articles of Incorporation
of

of

04 MAY 26 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

All Med Network Corp

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

(Document number of corporation (if known))

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

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Change Address to : 2700 SW 3rd Avenue, Suite 2E, Miami, Florida 33129.

Correction Of EIN# 35-2180966

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: _____

10/21/03

Effective date if applicable: 02/01/2004

(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 21 day of April, 2004

Signature

Sandra Fernandez

(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)

Sandra Fernandez

(Typed or printed name of person signing)

Owner

(Title of person signing)

FILING FEE: \$35