

P02000098712

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000073954 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 21 PM 3:18

COR AMND/RESTATE/CORRECT OR O/D RESIGN

J.Z. MEDICAL SUPPLIES INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Amendment

03/21/06



March 21, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

J.Z. MEDICAL SUPPLIES INC
814 S.W. 27 AVENUE #203
MIAMI, FL 33135

SUBJECT: J.Z. MEDICAL SUPPLIES INC
REF: P02000098712

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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) 245-6906.

Darlene Connell
Document Specialist

FAX Aud. #: H06000073954
Letter Number: 106A00019145

RECEIVED
06 MAR 21 AM 8:00
DIVISION OF CORPORATIONS

P.O. BOX 6327 - Tallahassee, Florida 32314

H06000073954

**ARTICLES OF AMENDMENT
TO
ARTICLES OF PROFIT CORPORATION
OF**

J.Z. MEDICAL SUPPLIES INC

P02000098712

(Present name)

Pursuant to the provisions of section 607,1006 Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST:

AMEDMENT ARTICLE VI

Deleted :

Gilberto Medina

814 S.W. 27 Ave #203

Miami Fl. 33135

New Register Agent

Jose Luis Gonzalez

814 S.W. 27 Ave #203

Miami Fl. 33135

AMEDMENT ARTICLE VII

DELETED:

Gilberto Medina (Director)

New Director

Jose Luis Gonzalez

814 S.W. 27 Ave #204

Miami Fl. 33135

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 21 PM 3:18

H06000073954

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, are as follows:

THIRD: The date of each amendment's adoptions: 03-6-06

FOURTH: Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment (s) 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 the 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 day 03-6-06

Signature

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Jose Luis Gonzalez

Typed or printed name

President

Title

H06000073954

CERTIFICATE OF DESIGNATION REGISTER AGENT/REGISTER OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the register office/registered agent, in the state of Florida.

J.Z. Medical Supplies Inc.
(Name of Corporation)

FLORIDA

Desiring to organize under the law of the State of

(Florida)

With its principal office, as indicate in the articles of incorporation

JOSE LUIS GONZALEZ
named _____
(Name of Registered Agent)

located at MIAMI County of DADE
(City) (County)

State of Florida, as its agent to accept service of process within this state.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTER AGENT.

SIGNATURE

Registered Agent

H06000073954