

PO2000/33616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

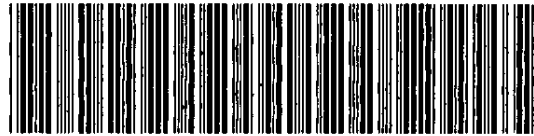
Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Corrected document
by telephone call
on 7/16/08

Office Use Only



300132316233

07/14/08--01017--029 **43.75

Amend

FILED
08 JUL 14 AM 9:29
CLERK OF STATE
TALLAHASSEE, FLORIDA

T. Roberts III 16 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Certified Medical Systems I, Inc.

DOCUMENT NUMBER: P02000133616

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

Please return all correspondence concerning this matter to the following:

Michael D. Dillman

(Name of Contact Person)

Certified Medical Systems I, Inc. DBA Mobility Express

(Firm/ Company)

2141 Loch Rane Blvd., Suite 116

(Address)

Orange Park, Florida 32073

(City/ State and Zip Code)

For further information concerning this matter, please call:

Michael Dillman

(Name of Contact Person)

at (904) 272-3022

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Certified Medical Systems, I, Inc.

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

FILED
08 JUL 14 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P02000133616

(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.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

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

Article VI - Initial Registered Agent & Office (to be Amended)

Article VII - Initial Board of Directors (to be Amended)

Certificate of Acceptance of Registered Agent (to be Amended)

(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: 06/20/08

Effective date if applicable: 06/20/08
(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.

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)

Michael D. Dillman

(Typed or printed name of person signing)

Vice-President, Secretary

(Title of person signing)

FILING FEE: \$35

AMENDMENT TO ARTICLE I - NAME

~~The name of this Corporation shall be changed to:
Certified Medical Systems I, Inc. dba Mobility Express.~~

**AMENDMENT TO ARTICLE VI - INITIAL REGISTERED AGENT AND
OFFICE**

The name of the new registered agent and new street address of this Corporation is:

Michael D. Dillman
2141 Loch Rane Boulevard
Suite 116
Orange Park, Florida 32073

AMENDMENT TO ARTICLE VII - INITIAL BOARD OF DIRECTORS

The names and addresses of the new Board of Directors are:

Joseph Rached, President
2141 Loch Rane Boulevard
Suite 116
Orange Park, Florida 32073

Michael D. Dillman, Vice-President
2141 Loch Rane Boulevard
Suite 116
Orange Park, Florida 32073

CERTIFICATE OF ACCEPTANCE OF REGISTERED AGENT

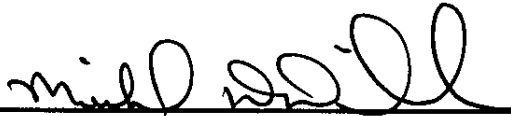
Pursuant to Section 48.091 and Section 607.0501, Florida Statutes, the following is submitted:

Certified Medical Systems I, Inc. dba Mobility Express
Desiring to continue to organize under the laws of the State of Florida, with it's principal office as indicated in the Amendments of the Articles of Incorporation in the State of Florida, has named as it's Registered Agent to accept service of process within this State:

Michael D. Dillman
2141 Loch Rane Boulevard
Suite 116
Orange Park, Florida 32073

ACKNOWLEDGEMENT:

Having been named as Registered Agent to accept service of process for the above stated corporation, at the place designated in the Amendment to Articles of the Incorporation, I hereby agree to act in this capacity, and agree to comply with the provisions of said Act.

A handwritten signature in black ink, appearing to read "Michael D. Dillman", is written over a horizontal line.

Michael D. Dillman