M-1910000:509

, (Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
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Special Instructions to	Filing Officer:			
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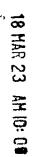


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R. WHITE MAR 2 6 2018



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: BDM Health Care	Management Group, Inc.	
DOCUMENT NUM	P03000046471		
The enclosed Article	es of Amendment and fee are sul	omitted for filing.	
Please return all corr	respondence concerning this mat	ter to the following:	
	Robert Mendia		
		Name of Contact Persor	1
	BayShore Dura Medical		
		Firm/ Company	
	7835 N.W. 148th Street		
		Address	
	Miami Lakes, Florida 33016		
		City/ State and Zip Code	2
Ma	ndia@bellsouth.net		
- IVIC		ed for future annual report	and Continu
	E-man address. (to be us	ed for future annual report	nouncation)
For further informati	on concerning this matter, pleas	e call:	
Robert Mendia		786 at (236-8881
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made p	payable to the Florida Depa	rtment 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 Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314



March 2, 2018

ROBERT MENDIA 7835 NW 148TH ST MIAMI LAKES, FL 33016

SUBJECT: BDM HEALTH CARE MANAGEMENT GROUP, INC.

Ref. Number: P03000046471

We have received your document for BDM HEALTH CARE MANAGEMENT GROUP, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

** PLEASE ONLY CHECK ONE BOX**

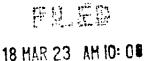
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 318A00004292

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) BDM Health Care Management Group, Inc. (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: A. If amending name, enter the new name of the corporation: BayShore Dura Medical, Inc. 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: , Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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 = Chief Executive 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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	. (Be specific)	
e e e e e e e e e e e e e e e e e e e		
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, needment if not contained in the amendment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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	
Robert Mendia (PD) & Lilian Mendia (STD)	
(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.	
Dated	
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)	
Robert E. Mendia (PD)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	,