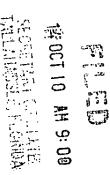
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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone #/	<u> </u>
PICK-UP	WAIT	MAIL
(Ві	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		!
***	Office Use Only	



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OCT 2 1 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORA	ATION: Affordable	Medical	Equipment	Solutions	Inc.
DOCUMENT NUMBE	cr: <u>P03660115</u>	<u> 2 ر 3</u>			_
The enclosed Articles of	Amendment and fee are su	bmitted for filing			
Please return all correspondent	ondence concerning this ma	tter to the followi	ng:		
_	Michael A. K	-ramarz			_
	Michael Aik	Name of Cont	act Person		_
	ffordable Medica				
		Firm/ Cor	npany		
<u>_:</u>	3223 Sunset Bl	ud Suit	e 104		
		Addre	ess	·	
(west Columbia	Sc มูๆ	1169		
-	vost Columbia,	City/ State and	Zip Code		
				, .	
_mk	ramarze oncol E-mail address: (to be us	001x . 612			_
- ** · · · · · · · · · · · · · · · · · ·	E-mail address: (to-be us	ed for future annu	iai report notilication	on):	
* * * * * * *	v				
For further information of	oncerning this matter, pleas	e call:			
Michael A	Vram - CZ	.,	616 . 97	77 - 9027	
Name of	Kramar z Contact Person	at (Area Code & Day	time Telephone Nu	mher
Traine of	Condict i Gracii		Aica code & Day	inne receptione (ve	mioci
Enclosed is a check for the	he following amount made p	payable to the Flo	rida Department of	State:	
S \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	opy Certi: opy is Certi: (Add	io Filing Fee ficate of Status fied Copy itional Copy closed)	
	g Address		Street Address		
	ment Section		Amendment Sect		
Division of Corporations P.O. Box 6327		Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
	·, · · · · · · ·		Tallahassee, FL		

Articles of Amendment to Articles of Incorporation of



The new essional corporation name must contain the Sunset Blud Ste 104 Sounset Blud Ste 104 Solumbia 50 29169
The new y," or "incorporated" or the abbreviation essional corporation name must contain the
The new y," or "incorporated" or the abbreviation essional corporation name must contain the
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Sunset Bluel, ste 104 Columbia 50 29169
Sunset Blud, Ste 104 Columbia SC 29169
Sunset Blud, Ste 104 Columbia SC 29169
Columbia SC 29169
a, enter the name of the

, Florida
(Zip Code)
-

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.

X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Muthew Madho M	3223 Sunset Blad
Add			Suite 104
Remove			West Columbia, 50 29169
2) Change	PD	Harold Halman	3223 Sunset Blvd.
Add			Suite 104
Remove			West Columbia, 50 2916
3) Change	TSD CFO	Michael A. Kramarz	3223 Sunset Blud
X Add			Suite 104
Remove			West Columbia, 50 29169
4) Change	CEO D	Roy Wayne Erwin	3223 Sunsof Blud
X Add			Suit + 104
Remove			West Columbia, SC 29169
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<u> </u>
	_
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y no, approacte, material (with	

date this document was signed.	, if other than the
•	
Effective date if applicable: September 25, 2014 (no more than 90 days after amendment file date)	_
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	
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.	
Dated/0/3/2014	
Signature Milal Lanny	
(By a director, president or other officer of 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 A. Kramarz (Typed or printed name of person signing)	_
(Typed or printed name of person signing)	
Secre tary (Title of person signing)	_
(Title of person signing)	