P04000077708

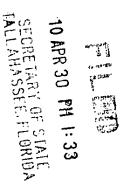
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C.COULLIETTE
MAY 0 4 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION:	E & E MEDICAL SERV. C	CORP.	
DOCUMENT NUMBER:		P04000077708		
The enclosed Article	es of Amendment and fee	are submitted for filing.		
Please return all corr	respondence concerning th	is matter to the following:		
	 	ADRIAN SALAZAR		
		Name of Contact Person		
_		Firm/ Company		
	240 E 1	ST AVENUE SUITE # 107		
Address HIALEAH, FL 33010 City/ State and Zip Code				
For further informati	ion concerning this matter	, please call:		
ADR	IIAN SALAZAR	at (786)	4434416	
Name o	f Contact Person	Area Code & Daytime Te	elephone Number	
Enclosed is a check	for the following amount	made payable to the Florida Depa	rtment of State:	
	\$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		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation , of

E & E MEDICAL SERV. CORP.			
(Name of Corporation as currently filed with the Florida Dept. of State)			
P04000077708			
(Document Number of Comparties (if known)			

P04	4000077708			
(Document Nu	imber of Corporati	on (if known)		
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		es, this <i>Florida Pi</i>	rofit Corporatio	on adopts the follow
A. If amending name, enter the new name	of the corporation	<u>ı:</u>		
				The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pr	ne designation "Ĉo	orp," "Inc," or [*] "C	Co". A professi	onal corporation
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE				
	,	·		10 API
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF				R 30 PM
D. If amending the registered agent and/or new registered agent and/or the new reg			a, enter the nar	ne of the
Name of New Registered Agent:	ADRIAN SAL	AZAR	<u>-</u> _	
New Registered Office Address:		VENUE SUITE ; da street address)	# 107	
	HIALEAH (City)		, Florida (Zip Code)	33010
New Registered Agent's Signature, if chang I hereby accept the appointment as registered			ot the obligation	s 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	Emilio L. Tain Hernandez	240 E 1ST AVENUE SUITE 107 HIALEAH, FL 33010	☐ Add ☐ Remove
<u>PD</u>	ADRIAN SALAZAR	240 E 1ST AVENUE SUITE 107 HIALEAH, FL 33010	☑ Add □ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter citional sheets, if necessary). (Be specific		
provisions	ndment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: 04	4/29/2010
Effective date <u>if applicable</u> :	04/29/2010	(date of adoption is required)
	(no more than 9	90 days after amendment file date)
Adoption of Amendment(s)	(<u>C</u> H	IECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	ndment(s) was/were sufficient for approval
by	(voting group)	.,,,
	(voting group)	
action was not required.		e board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
action was not required.	no adopted by and	
Dated 04/2	29/2010	
Signature _	Em/L	dent or other officer – if directors or officers have not been
sel		porator - if in the hands of a receiver, trustee, or other court
арі	Jointed Hadelary	by that inductary)
	F	EMILIO L. TAIN HERNANDEZ
	(Ту	ped or printed name of person signing)
		PRESIDENT
	(Title o	of person signing)