P04000080038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

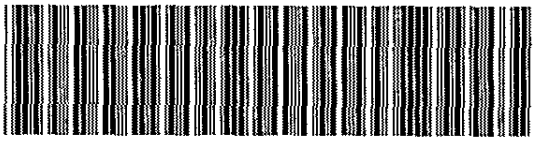
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Joell Adams
607.1006 Shareholder Approval
01-29-07
Darnell

Office Use Only



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12/28/06--01021--012 **35.00

FILED
07 JAN 24 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amendment
01-29-07
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DIABETIC HEALTH SUPPLY INC

DOCUMENT NUMBER: P04000080038

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

Please return all correspondence concerning this matter to the following:

JOELL ADAMS
(Name of Contact Person)

DIA-CARE INC
(Firm/ Company)

19 S. DIXIE HWY
(Address)

LAKE WORTH FL 33460
(City/ State and Zip Code)

For further information concerning this matter, please call:

JOELL ADAMS at (561) 807-6935
(Name of Contact Person) (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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2007

JOELL ADAMS
DIA - CARE INC
19 SOUTH DIXIE HWY.
LAKE WORTH, FL 33460

SUBJECT: DIABETIC HEALTH SUPPLY, INC.
Ref. Number: P04000080038

We have received your document and check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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

Letter Number: 807A00006074

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2007

JOELL ADAMS
DIA - CARE INC
19 SOUTH DIXIE HWY.
LAKE WORTH, FL 33460

SUBJECT: DIABETIC HEALTH SUPPLY, INC.
Ref. Number: P04000080038

We have received your document and check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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

Letter Number: 507A00001725

Articles of Amendment
to
Articles of Incorporation
of

FILED
07 JAN 24 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIABETIC HEALTH SUPPLY, INC.
(Name of corporation as currently filed with the Florida Dept. of State)

P04000080038
(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co.")

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

ARTICLE II PRINCIPAL OFFICE : The pricipl office is: 13 S. Dixie Hwy, Lake Worth, FL 33460

ARTICLE I: INITIAL OFFICERS AND/OR DIRECTORS
ROBERT T. KREBS, PRESIDENT
19 S. DIXIE HWY, LAKE WORTH FL 33460

ARTICLE II : REGISTERED AGENT
The new registered agent is: JOELL ADAMS
19 S. DIXIE HWY, LAKE WORTH FL 33460

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Joell C Adams
(Signature of Registered Agent)

1/22/07
(Date)

The date of adoption of the amendment(s) was: 12/18/06

Effective date if applicable: 12/18/06
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendments were approved by the shareholders. The number of votes cast for the amendments by the shareholders were sufficient for approval.

Signature Lynn C Redanid
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

LYNN REDANID
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: $35