

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : LAW OFFICES OF MANUEL E. IGLESIAS, P.A.
Account Number : I20050000092
Phone : (305) 789-~~2728~~ 2738
Fax Number : (305) 537-~~3928~~ 3938

*corrected
fax*

COR AMND/RESTATE/CORRECT OR O/D RESIGN

THAIS MEDICAL SUPPLIES INC.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP 25 AM 9:54

*Name chg
@ 9.26.06*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Thais Medical Supplies, Inc.

DOCUMENT NUMBER: P04000095698

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

Please return all correspondence concerning this matter to the following:

Jacqueline Roque De Escobar

(Name of Contact Person)

Thias Medical Supplies, Inc.

(Firm/ Company)

3383 N.W. 7 Stree, Suite 211

(Address)

Miami, Florida 33125

(City/ State and Zip Code)

For further information concerning this matter, please call:

Jacqueline Roque De Escobar

(Name of Contact Person)

at (786) 287-5788

(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



September 25, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

THAIS MEDICAL SUPPLIES INC.
3383 NW 7TH ST., SUITE 211
MIAMI, FL 33125

SUBJECT: THAIS MEDICAL SUPPLIES INC.
REF: P04000095698

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

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) 245-6964.

Irena Albritton
Document Specialist

FAX Aud. #: H06000235694
Letter Number: 906A00057096

RECEIVED
06 SEP 25 AM 8:00
DIVISION OF CORPORATIONS

P.O BOX 6327 - Tallahassee, Florida 32314

**Articles of Amendment
to
Articles of Incorporation
of**

Thais Medical Supplies, Inc.

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

P04000095698

(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):

Thias Services, Inc.

(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)**

None at this time.

(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)

N / A

(continued)

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SECRETARY OF
06 SEP 25 AM 9:54

The date of each amendment(s) adoption: N/A 9/20/06 JRDE

Effective date if applicable: 09/20/2006

(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)

Jacqueline Roque De Escobar

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35