

Division of Corporations

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P040000095937

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BILZIN, SUMBERG BAENA PRICE & AXELROD LLP.
Account Number : 075350000132
Phone : (305) 374-7580
Fax Number : (305) 351-2122

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

ENDOTECNICA MEDICAL DEVICES, INC.

Certificate of Status	0
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Page Count	02
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4/27/07

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Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1509, Florida Statute, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the corporation: Endotecnica Medical Devices, Inc.

2. The principal office address: 5201 Blue Lagoon Drive, Suite 846, Miami, FL 33126

3. The mailing address (if different): Same

4. Date of incorporation/qualification: June 23, 2004 Document number: P04000095937

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Alicia Sandoval

5201 Blue Lagoon Drive, Suite 846

Miami, Florida 33126

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

CT Corporation System

1200 South Pine Island Road

(P.O. Box NOT acceptable)

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized and the board of directors of the corporation has been notified in writing of the change.

Waldin P. Pérez - President
(Type or print name and title)

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.

3/13/07
(Date)

Peter F. Souza
(Signature of Registered Agent)

If signing on behalf of an Assistant Secretary

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