P04000118896

(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: Mr. Sanchez, authorized by Phone 3/15/05, to Changeall address and Changeall address and add corp. as subject to new mane:
T. leuro 3/15/05

Office Use Only



900047121899

BLEETAUY OF STATE

05 MAR -8 PM 3: 16

03/08/05--01053--015 **43.75

Amend + N/C

T BROWN MAR 1 5 2005

COVER LETTER

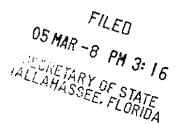
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Essence of Shape Corp.
DOCUMENT NUMBER: PO 40 00 118896
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Adian Sanchez (Name of Contact Person)
Essence of Shape Corp (Firm/Company)
600 NE 365t #1608 (Address)
Miami F1. 33137 (City/ State/ and Zip Code)
For further information concerning this matter, please call:
Cheric Palmer at (305) 497-3568 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of



Essence	of	Sha	Pa	Cor	a		
(Name of corp	oration as	current	y filed	with the	Florida	Dept.	of State)

PB4000118896

(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): Sand P Medical Corp. (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) Article II - business address: 19744 SW177th Ave Miami, Fl. 33187 Article II - mailing address: 19764 SW177th Ave, Miami, Fl. 33/87 Article II - Adrian Sanches - 19764 SW177th Ave, Miami, Fl. 33/87 Article II - Adrian Sanches - 19764 SW177th Ave, Miami, Fl. 33/87 Article III - Adrian Sanches - 19764 SW177th Ave, Miami, Fl. 33/87 Article III - Add of Alicer - Charie Palmer - Title COO 19764 SW177th Ave, Miami, Fl. 33/87 (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)

The date of each amendment(s) adoption: 2/22/05
Effective date if applicable: 2/21/05
(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.
Signed this 12 day of February, 2007.
(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)
Adrian Sanchez (Typed or printed name of person signing)
Tresident (Title of person signing)

FILING FEE: \$35