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To

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

Phone : (305)634-3694 Fax Number : (305)633-9696

COR AMND/RESTATE/CORRECT OR O/D RESIGN

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7 JUN -7 AM 8: 00

ACE MEDICAL EQUIPMENT RENT & SALES, INC.

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ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION

ACE MEDICAL EQUIPMENT RENT & SALES, INC. PO4000166093

(Present Name of Corporation)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendments to its articles of incorporation:

FIRST: Amendment(s) adopted: Indicate article number(s) being amended, added or delete ARTICLE IV:

DELETE: LEDIA PERERA

ADD AS REG. AGENT: ERNESTO MUÑOZ LAGO, 1631 NE 8TH ST. HOMESTEAD, FL 38033

ARTICLEVI:

DELETE: P/D-LEDIA PERERA, VP- NELAN J PERERA, S/T - BRIZAYS C PERERA ADD AS P/SEC/DIR: - ERNESTO MUNOZ LAGO, 1631 NE 8TH ST. HOMESTEAD, FL 33033

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendments adoption: $\omega/7/07$

FOURTH: Adoption of Amendment(s) (CHECK ONE)

<u> X</u>	The amendment(s) was/were approved b amendment(s) was/were sufficient for ap	y the shareholders. The number of votes cast for th proval.
	The following statement must be separately on the amendment(s): AThe n	y the shareholders through voting groups. ely provided for each voting group entitled to vote umber of votes cast for the amendment(s) was/were A. (Voting group)
	The amendment(s) was/were adopted by board of directors without shareholder action as shareholder action was not required.	
	The amendment(s) was/were adopted by shareholder action was not required.	the incorporator without shareholder action and

SIGNED THIS DAY 08 JUNE, 2007

SIGNATURE:

(By the Chairman or Vice Chairman of the Board of Directors, President, Incorporator, Director, Registered Agent or other officer if adopted by the shareholders.)

TYPED OR PRINTED NAME: ERNESTO MUNOZ LAGO TITLE: PRESIDENT/DIRECTOR

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	CERTIFICATE OF DESIGNATION		
	REGISTERED AGENT/ REGISTERED OFFICE		
KE	MEDICAL EQUIPMENT RENT & SALES IN		
	(Present Name)		

HOMESTRAD, F1. 33033.

PO4. 000 166 093

(Document Number of Conversion)

Having been named as Registered Agent and to accept service of process for the above stated Corporation at the place designated in the Articles of Incorporation, I hereby accept the appointment as Registered and agree to act in this capacity. I further agree to comply with the provisions of all statues relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

FLOESTO MUNTOZ LAGO.

Printed Name

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