

P05000009315

Florida Department of State  
Division of Corporations  
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J.M.R. MEDICAL SUPPLIES, CORP.

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*Amnd by  
8-10-06*



August 9, 2006

FLORIDA DEPARTMENT OF STATE

Division of Corporations

J.M.R. MEDICAL SUPPLIES, CORP.  
5470 W 22ND LN #202  
HIALEAH, FL 33016

SUBJECT: J.M.R. MEDICAL SUPPLIES, CORP.  
REF: P05000009315

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

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Carol Mustain  
Document Specialist

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06 AUG 10 AM 8:00

DIVISION OF CORPORATIONS

P.O BOX 6327 - Tallahassee, Florida 32314

(((H06000200181)))

Articles of Amendment  
to  
Articles of Incorporation  
of

J.M.R. MEDICAL SUPPLIES, CORP.

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

P05000009315

(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):**

(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)**

**THE NEW BOARD OF DIRECTORS SHALL READ AS FOLLOWS:**

**MAIKEL CESPEDES-RODRIGUEZ - PD AND REGISTERED AGENT**

**1840 WEST 49TH STREET #708**

**HIALEAH FL 33012**

**THE NEW PRINCIPAL & MAILING ADDRESS WILL BE:**

**1840 WEST 49TH STREET #708**

**HIALEAH FL 33012**

(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)

(continued)

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((H06000200181)))

The date of each amendment(s) adoption: AUGUST 09, 2006

Effective date if applicable: \_\_\_\_\_  
(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)

JULIET M. RIVERO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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 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**  
MAIKEL CESPEDES-RODRIGUEZ