

PD 5000036518

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000156100 3)))



H070001561003ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : SHUTTS & BOWEN LLP HEALTH LAW GROUP II  
Account Number : I20050000022  
Phone : (305) 347-7352  
Fax Number : (305) 347-7854

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 JUN 12 PM 1:27

FILED

COR AMND/RESTATE/CORRECT OR O/D RESIGN

AMERICARE HOME MEDICAL EQUIPMENT CORPORATION

RECEIVED

07 JUN 12 AM 8:00

DIVISION OF CORPORATIONS

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

*Am*  
*6-12-07*

FILED  
07 JUN 12 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

AMERICARE HOME MEDICAL EQUIPMENT CORPORATION  
(Name of corporation as currently filed with the Florida Dept. of State)

P05000036518  
(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)**

DELETE: Sandra Fomoso, D. 3923 Lake Worth Road, Suite 112, Lake Worth, Florida 33416

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(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)

The date of each amendment(s) adoption: 6-12-2007

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.

Signed this 12 day of June, 2007.

Signature [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) I hereby accept the appointment as Registered Agent and agree to act in this capacity.

Alfredo Ramos

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35