P05000078531

(Requestor's Name)				
(Address)	_			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(December 1)				
(Document Number)				
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SECRETARY OF STATE
TALLAHASSEE, FLOMBA

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION:	Redbridge N	etwork & Health	care, Inc.	
DOCUMENT NUM	NUMBER: P05000078531				
The enclosed Articles	s of Amendment a	nd fee are submitted	I for filing.		
Please return all corre	espondence conce	rning this matter to t	he following:		
		Carlos A. Ror			
		Name of Contac	et Person		
Post & Romero					
Firm/ Company					
3195 Ponce de Leon Blvd., Suite 400					
		3			
_	Coral Gables, FL 33134				
		City/ State and 2	Zip Code		
	E-mail address:	car@postandrome (to be used for future an	ro.com nual report notification)		
For further information	on concerning this	matter, please call:			
		at () Area Code & Daytime Te		
	Contact Person				
Enclosed is a check f	or the following a	mount made payable	e to the Florida Depar	rtment of State:	
☑ \$35 Filing Fee	\$43.75 Filing Fe Certificate of Sta	tus Certi	75 Filing Fee & fied Copy (tional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address dment Section on of Corporations Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

	of	6
Redbridge Netw	vork & Healthcare, I	nc.
(Name of Corporation as curre		Dept. of State)
P050	000078531	
(Document Num	nber of Corporation (if know	vn)
rsuant to the provisions of section 607.1006 nendment(s) to its Articles of Incorporation:	5, Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the
If amending name, enter the new name of	f the corporation:	
		The n
Enter new principal office address, if application of the second of the		
If amending the registered agent and/or r new registered agent and/or the new regis		Florida, enter the name of the
New Registered Office Address:	(Florida street a	ddress)
		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changir	ng Registered Agent:	
hereby accept the appointment as registered a		nd accept the obligations of the position
	Signature of New Registered	l Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title Name Address **Type of Action** ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Delete Article VII and replace it with the following new Article VII. Article VII.- The number of directors of the board of directors may be increased or decreased from time to time in such manner as may be prescribed by the Bylaws or by a majority of the shares entitled to vote. F. 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: (if not applicable, indicate N/A)

The date of each amendment(s)	adoption: December 31, 2009
	ecember 31, 2009
(r	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	."
(vo	oting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated_Januar	luget Bahlle
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
-	Eusenio Chinchilla (Typed or printed name of person signing)
-	President (Title of person signing)