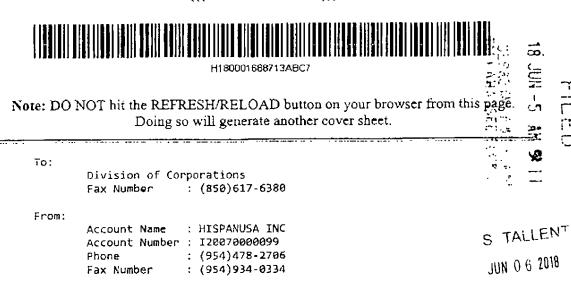


Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000168871 3)))



\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SONOGENIC ULTRASOUND INC.

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June 5, 2018

FLORIDA DEPARTMENT OF STATE Division of Corporations

SONOGENIC ULTRASOUND INC. P.O. BOX 771474 CORAL SPRINGS, FL 33077

SUBJECT: SONOGENIC ULTRASOUND INC.

REF: P05000080327

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

ALL WORDING MUST BE IN THE ENGLISH LANGUAGE.

The name of the person signing the document must be typed or printed beneath or opposite the signature.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II FAX Aud. #: H18000168871 Letter Number: 318A00011607

## **COVER LETTER**

TO:	Amendment Section	
	Division of Corporations	:

NAME OF CORPORAT	AOS:	ICGENIC ULTRASOUN	D INC
DOCUMENT NUMBER	PO	5000080327	
The enclosed Articles of A		bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
	E	LIDA BEATRIZ HODGS	ON
		Name of Contact Person	α
		PRESIDENT	
		Firm/ Company	<del></del>
		7628 MARGATE BLVD	)
<u></u>		Address	<del></del>
		MARGATE FL 33063	
• —		City/ State and Zip Cod	c
		info@hispanusa.co	m
<del></del>	E-mail address: (to be us	sed for future annual report	
For further information con	ncerning this matter, pleas	ec call:	
ELIDA BEATRIZ HODG	SON	at (954	540-1212
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendr Division P.O. Box	Address ent Section of Corporations : 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

	SONOGENIC ULTR	RASOUND INC.		
(Name	of Corporation as currently t	iled with the Florida Dept.	of State)	
	P0500008	30327		
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Corporation ado	opts the following amendme	nt(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must be distinguishable and con "Corp" "Inc" or Co" or the design word "chartered," "professional associate.  B. Enter new principal office address, (Principal office address MUST BE A S	iation "Corp," "Inc," or "Co ition," or the abbreviation "P. if applicable:	". A professional corporati	ion name must contain the	
C. Enter new mailing address, if appliance (Mailing address MAY BE A POST)  D. If amending the registered agent an new registered agent and/or the new registe	OFFICE BOX)  along registered office address		JUN 3	FILED
Name of New Registered Agent	ELIDA BEATRIZ HODGSC	N .	·····	
	7628 MARGATE BLVD			
	(Florida street	adáress)		
New Registered Office Address:	MARGATE	, F	Florida	
	(Ci	'ry)	(Zip Cod€)	
New Registered Agent's Signature, if ell I hereby accept the appointment as regist	hanging Registered Agent. ered agent. I am familigh of the	h and accept the obligations c	of the position.	

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>v</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>S</u> 2	lly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1)Change	P	ALEISI THOMPSON	10235 NW 4TH C <b>T</b>
Add			PLANTATION FL 33324
X Remove			
2) Change	VP	ELIDA HODGSON	2403 SW 42ND AVE
Add			FT LAUDERDALE FL 33317
X Remove			
3) Change	Р	ELIDA BEATRIZ HODGSON	2403 SW 42ND AVE
X Add			FT LAUDERDALE FL 33317
Ramove			
4) Change	<del></del>	<u>.                                    </u>	·
Add			
Rémove			
5) Change	-		
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

	heets, if necessary).	(Be specific)			
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an amendinent i	rovides for an excha	nge, reclassificat	ion, or cancellat	ion of issued shar	es.
provisions for im	olementing the amen-	dment if not cont	ained in the ame	endment itself:	
(ij no: applica	ble, indicate N/A)				
					<del></del>
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	<del></del>				

The date of each amendment(s)	adoption:, if other t
date this document was signed.	
_	UNE 04, 2018
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were a must be separately provided for	pproved 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 can	st for the amendment(s) was/were sufficient for approval
py.	(voting group)
	(voting group)
☐ The amendment(s) was/were a	dopted by the board of directors without shareholder action and shareholder
	dopted by the incorporators without shareholder action and shareholder
The amendment(s) was/were as action was not required.	
The amendment(s) was/were as action was not required.	
The amendment(s) was/were as action was not required.	
The amendment(s) was/were as action was not required.  Dated  Discourse	04, 2018
The amendment(s) was/were as action was not required.  Dated  Discourse	
The amendment(s) was/were as action was not required.  Dated  Signature  (By a select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court
The amendment(s) was/were as action was not required.  Dated  Signature  (By a select	director, president or other officer – if directors or officers have not been
The amendment(s) was/were as action was not required.  Dated  Signature  (By a select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court
The amendment(s) was/were as action was not required.  Dated  Signature  (By a select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
The amendment(s) was/were as action was not required.  Dated  Signature  (By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)  ELIDA BEATRIZ HODGSON