

POS 0000 81585

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : ALLSTATE MEDICAL CONSULTING, INC.
Account Number : I20110000067
Phone : (786) 362-0124
Fax Number : (305) 541-5612

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
MIAMI STAR MEDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	0
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2011 OCT 18 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
11 OCT 18 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]
11-18-11

Articles of Amendment
to
Articles of Incorporation
of

MIAMI STAR MEDICAL CENTER, INC

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

P05000081585

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: JIMENEZ, KELLYS

1506 EAST 4 AVE

New Registered Office Address: (Florida street address)

HIALEAH, Florida 33010
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Kellys Jimenez
Signature of New Registered Agent, if changing

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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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	JIMENEZ, KELLYS	1506 EAST 4 AVE HIALEAH FL 33010	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
P	FERRARA, ELVIS	1506 EAST 4 AVE HIALEAH FL 33010	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

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)

Seller agrees to sell and Buyer agrees to purchase 100% of the Shares on the terms and conditions on the bill of sale.

Seller delivered certificates representing 100% of his Shares

duly endorsed in blank and free and clear of all liens, claims, charges or other encumbrance.

The date of each amendment(s) adoption: 06-15-2011

(date of adoption is required)

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted 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.

Dated 10-17-11

Signature

Kellys Jimenez

(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)

Kellys Jimenez

(Typed or printed name of person signing)

President

(Title of person signing)