## P05000085958

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Spacialty liagnostic Service Center, It
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lary Rodugus/ (Namelof Contact Derson)  Special fy Diagnostic Cervice Cerric, In (Firm/ Company)
20533 BISCAYNE Blvd. # 107
Aventura FL 33180 (City/State/ and Zip Code)
For further information concerning this matter, please call:
Have of Contac (Person) at (305) 303-5490.  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee Status Status Certificate of Status (Additional copy is enclosed)  \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, FL 32399

Articles of Amendment to
Articles of Incorporation

Spacealty Diagnostic Service Canter, Inc. (Name of corporation as currently filed with the Florida Dept. of State)
(Name of corporation as currently filed with the Florida Dept. of State)
P 05000085958  (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):
HASS
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," "Tor "Co.")  (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "PA")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)  To da/ata: Jose Lus Custa Moon, as Prasa dan t
To add : Madene Cuesta , as Praxidant.
To change address -
from: 315 NE 1545+ Mami, F1 33162
to : 20533 BISCAUPIL Blvd, # 107
Amentura, FL 33180.
To add: Zalry Rodrigues, as Socretary
and Trus sure
(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)
Issued shaves has been transfer to:
Marlene Cuesta

The date of each amendment(s) adoption: $\frac{\sqrt{6}/20/2005}{}$
Effective date if applicable: 06/20/2005  (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 20 day of 19 Ac , 2005.  Signature  (By a director, president of 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  (Typed or printed name of person signing)  (Title of person signing)

FILING FEE: \$35