FAX NO. :3052201440

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L AND J HEALTH CARE SUPPLIES CORP.

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FROM :LAZARUS Jul 6 07 10:29a

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Articles of Amendment to Articles of Incorporation 07 JUL -6 PM 12: 28

SEURETARY OF STATE
TALLAHASSEE, FLORIDA

L and J Health Care Supplies Corp.

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

P05000098168

(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.")

(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)

(continued)

The date of each amendment(s) adoption: 07/05/2005
Effective date if applicable: 07/05/2005
(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.
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)
ESMERALDA FONSECA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35