P06000041371

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(De	ocument Number)	
(DC	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



000089230470

04/10/07--01018--010 **70.00

APPRIO AMII: 05
SECRETARY OF STATE
SECRETARY OF STATE

O7 APR 10 AM 10: 29

OF APR 10 AM 10: 29

OFFICE OFFICE PLOSION

N.C. APR 1 0 2007

EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name 1000 PONCE DE LEON BLVD. SUITE:101 Address CORAL GABLES, FL 33134 (305) 444-4994 City/State/Zip Phone

OFFICE USE ONLY

Examiner's Initials

20LU 11		DIAGNOST	(D)	
(Corpo	ration Name)		(Document #)	ם מססטי
(Согра	ation Name)		(Document #)	1000°
·				
(Corpor	ation Name)	 	(Document #)	
·	<u> </u>	<u> </u>		
(Corpor	ation Name)		(Document #)	
Walk in	Pick up t	ime	Certified Copy	-
Mail out	☐ Will wait	Photocopy	Certificate of Status	
;	· · · · ·	Тистосору	— Continuate of Status	
	.,	Contracting Constitution Contracting Contracting		•
NEW FILING	S	AMENDMEN	TS	
Profit		Amendment		
NonProfit		Resignation of R.A	Officer/ Director	
Limited Liability		Change of Register		
Domestication		 		
		Dissolution/Withdr	awal	
Other		Merger		
OTHER FILM	GS	REGISTRATION/		
Annual Report		QUALIFICATION		
Fictitious Name		Foreign		
Vame Reservation		Limited Partnership		
10.110 10.00 70.00		Reinstatement		
	t	Trademark		

Other

Articles of Amendment to Articles of Incorporation of

SOLUTION DIAGNOSTIC CENTER, INC.

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

P06000041371	
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> dopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
SOLUTION DIAGNOSTIC CENTER INC.	
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
SE SE	
PR -	四
SSEE	FILED
APRIO AMITO STATE SECRETARY OF STATE ALLAHASSEE, FLORID	-
RATE OF	5
(Attach additional pages if necessary)	
f an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions or implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

(continued)

The date of each amendment(s) adoption: APRIL 9TH, 2007
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment me 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)
JOSE ALEXANDER LOPEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35