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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 : (305)634-3694 Phone

: (305) 633-9696 rax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

FLEMING MEDICAL EQUIPMENT, CORP.

Certificate of Status 0 Certified Copy 1 Page Count 03 Estimated Charge \$43,75

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ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF

FLEMING MEDICAL EQUIPMENT, CORP. P06000101583

(Present Name of Corporation)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendments to its articles of incorporation:

FIRST: Amendment(s) adopted: Indicate article number(s) being amended, added or deleted.

PLEASE DELETE AS REG AGENT/P: JOSE DUENAS

PLEASE DELETE AS VP: DANIA DUENAS

PLEASE ADD AS REG AGENT/P/S/D: ORLANDO A. CAJINA, $$825 \text{ W } 16^{\text{TH}}$ AVE, HIALEAH, FL 93012

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issues shares, provisions for implementing the amendment if not contained in the amendment itself follows:

THIRD: The date of each amendments adoption: FEBRUARY 10, 2008

FOURTH: Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were approved by the shareholders. The number of votes cannot the amendment(s) 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 board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporator without shareholder action and shareholder action was not required.

SIGNED THIS FEBRUARY 10, 2009

SIGNATURE:

(By the Chairman or Vice Chairman of the Board of Directors, President, Incorporator, Director, Registered Agent or other officer if adopted by the shareholders.)

TYPED OR PRINTED NAME: ORLANDO A. CAJINA TITLE: PRESIDENT/DIRECTOR

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EMPIRE CORP KIT

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

PRINTING MEDICAL EQUIPMENT, CORP

(Present Name)

382-5 W 16 Mr. AUE # 3

HIALEAH FL. 33012.

(Document Number of Corporation)

Having been named as Registered Agent and to accept service of process for the above stated Corporation at the place designated in the Articles of Incorporation, I hereby accept the appointment as Registered and agree to act in this capacity. I further agree to comply with the provisions of all statues relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

() lando A. Cajino.
Registored Agent Signature

ORIANDA A. CAJINA
Printed Name

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