## 106000102689

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Amend

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06 OCT -6 AM ID: 02

SECRETARY OF STATE
SECRETARSSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: Dayanne Me	edical Center Inc	
DOCUMENT N	JMBER: P06000102689		
The enclosed Arti	c <i>les of Amendment</i> and fee a	re submitted for filing.	
Please return all c	orrespondence concerning thi	is matter to the following:	
Dar	is Hernandez		
	(Name	of Contact Person)	
Da	yanne Medical Center In	с.	
	(Fir	rm/ Company)	
575	55 W. Flagler St. Suite 207		
		(Address)	
Mia	mi, Fl. 33144	PRI - retain for two conservations and conservations.	PROGRAMMA
For further inform	(City/ Station concerning this matter,	tate and Zip Code) please call:	
Daris Hernandez		at ( 305 ) 854-07	11
(Name of Contact Person) (Area Code & Daytime Telephone Number		e Telephone Number)	
Enclosed is a chec	k for the following amount:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	•

## Articles of Amendment 06 0C7 -6 AM 10: 02 of SECRE FARY OF STATE

Dayanne Medical Center Inc.

P06000102689

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

(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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.") (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)
Add Vice-President
Marite Blanco 593-51-6507
15761 SW 137 Ave # 201
Miami Fl 33177
(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)
N/A
(continued)

The date of each ame	adment(s) adoption: 10/05/06
Effective date if application	cable: 10/05/06
<del>- •</del> ·	(no more than 90 days after amendment file date)
Adoption of Amendm	ent(s) ( <u>CHECK ONE</u> )
	nent(s) was/were approved by the shareholders. The number of votes cast for lent(s) by the shareholders was/were sufficient for approval.
following st	nent(s) was/were approved by the shareholders through voting groups. The atement must be separately provided for each voting group entitled to vote on the amendment(s):
"The nu	mber of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
	nent(s) was/were adopted by the board of directors without shareholder action lder action was not required.
	nent(s) was/were adopted by the incorporators without shareholder action and action was not required.
Signatur	(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)
	Daris Hernandez  (Typed or printed name of person signing)
	(Typed of printed name of person signing)
	President
	(Title of person signing)

**FILING FEE: \$35**