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BECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ESMAT MEDIC	CAL, INC		<u> </u>
DOCUMENT NUMBER: P06000114739		·	
The enclosed Articles of Amendment and fee are s	submitted for filing	<u>)</u> .	
Please return all correspondence concerning this m	natter to the follow	ing:	
ALDO MATOS			
(Name of C	ontact Person)		
ESMAT MEDICAL, INC			
(Firm/	Company)		
815 NW 57 AVE, SUITE 218			
(Ac	ldress)		
MIAMI, FL 33126			
(City/ State	and Zip Code)		
For further information concerning this matter, ple	ease call:		
ALDO MATOS	at (305)	877 - 1882	
(Name of Contact Person)	(Area Code	& Daytime Tele	eptione Number)
Enclosed is a check for the following amount:			
\$35 Filing Fee \$\sum \text{Certificate of Status}\$	\$43.75 Filing Fe Certified Copy (Additional cop enclosed)		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations S Center Circle	

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Articles of Amendment 08 MAR -3 PM 3: 56

Articles of Incorporation SECRETARY OF STATE of TALLAHASSEE, FLORIDA

ESMAT MEDICAL, INC		
	(Name of corporation as currently filed with the Florida Dept. of State)	
	•	
	P06000114739	
	(Document number of corporation (if known)	

adopts the following amendment(s) to its Articles of Incorporation:

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation **NEW CORPORATE NAME (if changing):** N/A (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) ARTICLE VII: THE INITIAL OFFICER(S) AND/OR DIRECTOR(S) OF THE CORPORATION IS/ARE: MUST BE AMENDED AS FOLLOW: DELETE THE TITLE OF: TITLE: VP JESUS ESTARELLAS - 6401 SW 55 STREET, MIAMI, FL 33155 THE ARTICLE MUST KEEP ONLY THE TITLE OF: TITLE: P ALDO MATOS - 15877 SW 61 WAY, MIAMI, FL 33193 (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 amendmen	t(s) adoption: _	FEBRUARY 01, 2008
Effective date if applicable:		ARY 01, 2008
	(no more than 90 c	lays after amendment file date)
Adoption of Amendment(s)	(<u>CHECK</u>	ONE)
	• •	red by the shareholders. The number of votes cast for irs was/were sufficient for approval.
	t must be separat	red by the shareholders through voting groups. The rely provided for each voting group entitled to vote
"The number o	f votes cast for th	e amendment(s) was/were sufficient for approval by
 	(voting group)
The amendment(s) and shareholder ac		d by the board of directors without shareholder action ired.
The amendment(s) shareholder action		d by the incorporators without shareholder action and
selec		other officer - if directors or officers have not been tor - if in the hands of a receiver, trustee, or other court at fiduciary)
		ALDO MATOS
	(Typed	or printed name of person signing)
		PRESIDENT
		(Title of person signing)

FILING FEE: \$35