

Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATIONS

Division of Corporations  
Fax Number : (850) 205-0380

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

COR AMND/RESTATE/CORRECT OR O/D RESIGN

IMPERIAL MEDICAL HEALTH CARE INC.

Certificate of Status	0
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

Ps 9/26/06  
Amend

Articles of Amendment  
to  
Articles of Incorporation  
of

**FILED**  
06 SEP 26 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**IMPERIAL MEDICAL HEALTH CARE INC.**

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

**P06000121982**

(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.")  
(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)**

**PLEASE AMEND THE FOLLOWING:**

**PLEASE ADD SECOND LAST NAME TO PAVEL DOMINGUEZ - PD**

**THE NAME SHOULD READ: PAVEL DOMINGUEZ ABREU**

**ALSO CORRECT THE STREET ADDRESS NAME:**

**SHOULD READ: FLAGLER**

**ALL OTHER INFORMATION REMAINS THE SAME.**

(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)

The date of each amendment(s) adoption: 09/26/06

Effective date if applicable: \_\_\_\_\_  
(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)

**PAVEL DOMINGUEZ ABREU**

\_\_\_\_\_  
(Typed or printed name of person signing)

**PRESIDENT/DIRECTOR**

\_\_\_\_\_  
(Title of person signing)