## P06000145576

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Medipro Pa	aramedical Corp.	
DOCUMENT NUM	IBER:P060001	145576	
The enclosed Article	s of Amendment and fee a	re submitted for filing.	
Please return all corr	espondence concerning thi	is matter to the following:	
	Steven R. M	1elendez	
	(Name o	of Contact Person)	
	Medipro Pa	aramedical Corp.	
	(Fir	m/ Company)	<del>,     </del>
	3445 N. Pil	NEWALK DR., #108	
		(Address)	
	MARGATE	FL 33063	
	(City/ S	tate and Zip Code)	<del></del>
For further informati	on concerning this matter,	please call:	
Steven R. Melend	dez	at (954)696-3	765
(Name of Contact Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check t	for the following amount:		•
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is 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 Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

Medipro Paramedical Corp.
(Name of corporation as currently filed with the Florida Dept. of State)
P06000145576
(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)
Principle address and Mailing address - Change to: 3445 N. PINEWALK DR., #108, MARGATE FL 33063
Registered Agent - Change to: Steven R. Melendez,3445 N. PINEWALK DR., #108, MARGATE FL 33063
Director (Lisa Monti) Change to: Kay Donaldson,102138 NW 33 St., Sunrise FL 33323
Remove Secretary - Lisa Monti
Vice President - Change to: Kay Donaldson,102138 NW 33 St., Sunrise FL 33323
K I, Steven Melendez, am familiar with the obligation,
of the parition of Registered Agent
(Stenas & Miland
(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)
Vice President is 50% shareholder with 500 shares of common stock.
The 500 shares originally issued to old VP - Lisa Monti, has been transferred to
new VP - Kay Donaldson
(continued)

The date of e	ach amendment(s) adoption: 12/20/06
Effective dat	e if <u>applicable</u> : <u>1/1/07</u>
	(no more than 90 days after amendment file date)
Adoption of	Amendment(s) (CHECK ONE)
	ne amendment(s) was/were approved by the shareholders. The number of votes cast for amendment(s) by the shareholders was/were sufficient for approval.
foi	the amendment(s) was/were approved by the shareholders through voting groups. The slowing statement must be separately provided for each voting group entitled to vote parately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
	ne amendment(s) was/were adopted by the board of directors without shareholder action d shareholder action was not required.
	te amendment(s) was/were adopted by the incorporators without shareholder action and areholder 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)
	Steven R. Melendez
	(Typed or printed name of person signing)
	President
	(Title of person signing)

FILING FEE: \$35