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(((H11000282850 3)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN AMERICAN HEALTH PROVIDERS, CORP.

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December 2, 2011

FLORIDA DEPARTMENT OF STATE

AMERICAN HEALTH PROVIDERS, CORP. Division of Corporations

11011 NW 62 CT HIALEAH, FL 33012

SUBJECT: AMERICAN HEALTH PROVIDERS, CORP.

REF: P07000024480

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

If amending the officers and or directors, please list all officers/directors of the corporation as you want the record to be. If Luis M. Martinez is still the president, he must be listed above on page **(1)**.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

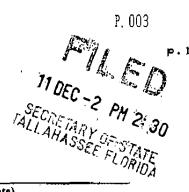
FAX Aud. #: H11000282850 Letter Number: 711A00027059

P.O BOX 6327 - Tallahassee, Florida 32314

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Articles of Amendment to Articles of Incorporation ٥ť



AMERICAN HEALTH PROVIDERS, CORP.	
(Name of Corporation as currently filed with the	: Florida Dent, of State)
P07000024480	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Profts Corporation adopts the followi
A. If amending name, enter the new name of the corporation:	
The new name must be distinguishable and contain the word "cor abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp. and must contain the word "chortered," "professional association of the word "chortered,"	p," "Inc," or "Ca". A professional corporation
B. <u>Enter new principal office address, if applicables</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
	·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Avent; N/A	
(Florido s	street address)
New Registered Office Address: N/A	, Florida
(Cit	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familial	ati r with and accept the obligations of the position
Signature of New Registered	d Agent, if changing
	- · · · · · · · · · · · · · · · · · · ·

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iditional sheet.) Title(s)	Name	<u>.A</u> d	dress	
VP	DIANA FERNANDEZ		11 NW 62 CT ALBAH. PL 33012	
<u>P</u>	LUIS M. MARTINEZ		011 NW 62 CT ALEAH, FL 33012	
		<u> </u>		
				•••
"	-			
<u>.</u>				
REMOVING an o	fficer and/or director, please list th	e title(s) and na	me of the officer/director to be	
ile(s) Nan	<u>1e</u>	Title(a)	<u>Name</u>	
		4)	·	
		5)		

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II amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
		
A CONTRACTOR OF THE CONTRACTOR		
		-

Page 3 of 4

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provisions:	inent provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment it not contained in the amendment itself; opticable, indicate N/A)
	A DESCRIPTION OF THE PROPERTY
e drie of each	s mendment(s) adoption: 12/01/2011
fertiv s date <u>if</u>	
	(no more than 90 days after amendment file date)
option of Am	endment(s) (CHECK ONE)
by the shareho The amendme	an(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval. n(s) was/were approved by the shareholders through voting groups. The following naturement
,	ately provided for each voting group entitled to vote separately on the amendment(s);
	ober of yours cast for the amendment(s) was/were sufficient for approval
by 1005	(voting group)
The amendment action was not	m(s) was/were adopted by the board of directors without shareholder action and shareholder
The amendmon action was not	nt(s) was/were adopted by the incorporators without shareholder action and situacholder required.
	Dated 12/01/2011
	Shirt—
	Signature (By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trusted, or other court appointed fiduciary by that fiduciary)
-	LLIS M. MARTINEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)