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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ce Medical (Enter Inc.
DOCUMENT NUMBER: PO 70000	082794
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Fearusco Fearus (Name of	nlunos
(Name of	Contact Person)
Eminence Medical (Firm	enter Inc.
(Firm	/ Company)
7392 NW 35 -	terrace Surte 310
(A	address)
Miami, Fl, 33	122
Ulcami, Fl, 33 (City/ State	e and Zip Code)
For further information concerning this matter, pl	ease call:
Francisco Franco Monoz (Name of Contact Person)	at (305) 994 9467 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigcup \$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	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Eminence Medical Carder The.

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

107000082794

(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	r "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbrevia	tion "P.A.")

<u>AMENDMENTS ADOPTED</u>- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Article I Feanusuo Feanco Muños 7392 NOU 35 terrace Suite 310
7392 NOW 35 terrace Suite 310
Mami, FL, 33122
Atole III Fearusco Franco Muños
Adrele III Fearces Franco Muños 7392 NW 35 TENACE SVITE 310 Mrami, Fl, 33122
Mrami, FC, 33122
(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)
\mathcal{N}/A

(continued)

The date of each amendment(s) adoption: 01-09- 2008		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	was/were approved by the shareholders. The number of votes cast for y the shareholders was/were sufficient for approval.	
	was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote mendment(s):	
"The number of	votes cast for the amendment(s) was/were sufficient for approval by	
	(voting group)	
	was/were adopted by the board of directors without shareholder action on was not required.	
shareholder action v Signature	Mululy	
selecte appoir	irector, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
<u></u>	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	

FILING FEE: \$35