

P08000002567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

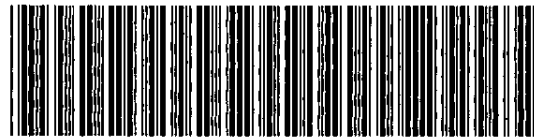
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800120710258

03/20/08--01046--022 **43.75

SECRETARY OF STATE
TALLAHASSEE FLORIDA

08 APR -4 PM 4:05

FILED

TS

4015/13
[Signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Healthcare System Administration, Inc

DOCUMENT NUMBER: P08000002567

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pierre A. Gaston, President

(Name of Contact Person)

Healthcare System Administration, Inc.

(Firm/ Company)

2500 NW 79th Avenue Suite 157

(Address)

Doral, FL 33122

(City/ State and Zip Code)

For further information concerning this matter, please call:

Shirley Beranger

(Name of Contact Person)

at (786) 419-8143

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 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 Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2008

M.D.
PIERRE A GASTON, ~~ESQ~~
2500 NW 79 AVE STE 157
DORAL, FL 33122

SUBJECT: HEALTHCARE SYSTEM ADMINISTRATION, INC.
Ref. Number: P08000002567

We have received your document for HEALTHCARE SYSTEM ADMINISTRATION, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

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) 245-6927.

Tracy Smith
Document Specialist

Letter Number: 308A00017417

RECEIVED

2008 APR -4 AM 18:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Articles of Amendment
to
Articles of Incorporation
of**

Healthcare System Administration, Inc

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

P08000002567

(Document number of corporation (if known))

FILED
08 APR - 4 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)**

Pursuant to Section 607.1006: delete the following:

Romulus, Claude Title: Director

Pursuant to Section 607.1006: Add the following Directors with a change of title:

Pierre A. Gaston, President

Shirley Beranger, Vice President

Pierre Pean, Director

Yegues Schettini, Director

Marc-Antoine Joseph, Director

(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 amendment(s) adoption: March 14th, 2008

Effective date if applicable: March 14th, 2008
(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)

Shirley Beranger

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE: \$35