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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	PROMED, INC.	
DOCUMENT NUM	BER:	P08000018518	
The enclosed Articles	s of Amendment and fee a	re submitted for filing.	
Please return all corre	espondence concerning thi	s matter to the following:	
	SHIRLEY LOUISE THOMPSON		
	N	ame of Contact Person	
<u></u>		PROMED, INC	
		Firm/ Company	
	3325 HOLLYWOOD BLVD STE 304		
Address			
		YWOOD FL 33021	
	Ci	ity/ State and Zip Code	
<u></u>	PROMEDING E-mail address: (to be used	CLT@HOTMAIL.COM d for future annual report notification)	
For further information	on concerning this matter,	please call:	
SHIRLI	EY THOMPSON	at (954) 99 Area Code & Daytime Tele	3 1501
Name of	Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check for	or the following amount m	nade payable to the Florida Depart	ment of State:
☑ \$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 Add Amendment S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PRO	OMED, INC.		TASE 09
(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)	强星工
P08	000018518		弱二二
(Document Nun	nber of Corporation (if kno	wn)	ED SEE
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	lorida Profit Corporatio	n adopte the following
A. If amending name, enter the new name of	f the corporation:		7
			The new
abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro B. Enter new principal office address, if app (Principal office address MUST BE A STREE)	efessional association," or		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)			
D. If amending the registered agent and/or new registered agent and/or the new registered.		n Florida, enter the nan	ne of the
Name of New Registered Agent:	.		
New Registered Office Address:	(Florida street d	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as		and accept the obligation.	s of the position.
	Signature of New Registere	d Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
TREAS	MALISSA STEWART	3325 HOLLYWOOD BLVD STE 304 HOLLYWOOD, FL 33021	☑ Add □ Remove
	dditional sheets, if necessary). (Be s	FV/	
provisi	mendment provides for an exchange ons for implementing the amendmenting the amendmenting the amendmenting the applicable, indicate N/A)		

The date of each amendmen	
Effective date <u>if applicable</u> :	7-1-2009 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
	(voing group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	SHIRLEY LOUISE THOMPSON
	(Typed or printed name of person signing)
	PRESIDENT/OWNER
	(Title of person signing)