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(Address)

(Address)

(City/State/Zip/Phone #)

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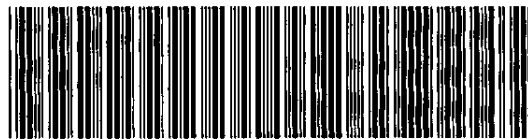
(Business Entity Name)

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2010 JUL 19 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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7/20/10

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Acute Source Inc.

DOCUMENT NUMBER: EIN: 26-3561075

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

Please return all correspondence concerning this matter to the following:

Pedro Garcia
Name of Contact Person

Acute Source Inc.
Firm/ Company

10500 SW 111 st.
Address

Mimai Florida 33176
City/ State and Zip Code

garciat@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pedro Garcia at (305) 785-4390
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
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| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
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(Additional Copy is enclosed) |
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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

FILED

2010 JUL 19 PM 4 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Title)

(Name of Corporation)

(Document Number, if known)

Florida

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314