Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100000255743)))



Note: DO NOT hit the REF. : I/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number

: (305)633-9696

er the email address for this business entity to be used for your annual report mailings. Enter only one email address please. \*\*Enter the email address for this business entity to be used for this

Email Address:

PAGE 01/04

## COR AMND/RESTATE/CORRECT OR O/D RESIGN CENTURY CLINICAL LAB, INC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

2/4/2010

HIDOODOSS FILE 2010 FEB -4 AM 9:31 TALLAHASSEE. FLOORE

Articles of Amendment to Articles of Incorporation of

|  | Articles of Incorporation of                             |   | TALLAHASSEE. FLORID          |  |  |
|--|--|---|------------------------------|--|--|
| CENTURY CLINICAL LAB, INC  |  | AB,INC                                  |                              |  |  |
| (Name of Corporation as corrently filed with the Florida Dept. of State)   |  |   |                              |  |  |
| P  | 9000013133   |   |                              |  |  |
| (Document N  | umber of Corporat  | ion (if known)                          |                              |  |  |
| Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation  | 006, Florida Status<br>:                                 | es, this Florida Profit Corpo           | pration adopts the following |  |  |
| A. Hamending name, enter the new name  | of the corporatio  | <u>n:</u>                               | •                            |  |  |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p   | he designation "C  | orp," "inc," or "Co". A pre             | gessional corporation        |  |  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX) |  | 11300 NW 87 COURT                       | SUITE 155                    |  |  |
|  |  | HIALEAH GARDENS F                       | <u>L 3</u> 3018              |  |  |
|  |  | THE SAME ABOVE                          |                              |  |  |
| D. If amending the registered agent and/or new registered agent and/or the new re-   | registered office<br>gistered office add                 | address in Florida, enter the<br>iross: | name of the                  |  |  |
| Name of New Registered Agent:  | BARBARA VALLE  |   |                              |  |  |
| New Registered Office Address:   | 11300 NW 87 COURT SUITE 155-157 (Florida street address) |   |                              |  |  |
|  | HIALEAH GA<br>(Ctry)                                     |   | orida 33018<br>e)            |  |  |
| New Registered Agent's Signature, if change I hereby accept the appointment as registered.   | agent. I am fanti  | Rogistered Agent, if changing           |                              |  |  |

Page 1 of 3

47225000014

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) Title Name | Address Type of Action VICEP BARBARA VALLE 50% 2484 WEST 74 PLACE ☐ Add Remove HIALEAH FL 33016 BARBARA VALLE 40 % VIÇEP 2484 WEST 74 PLACE ☑ Add HIALEAH EL 33016 ☐ Remove TREA HEROINA R GONZALEZ 2721 S W 18 STREET ☑ Add HIALEAH FL 33016 ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) ARTICLES V INITIAL OFFICERS AND /OR DIRECTOR ADDING HEROINA R GONZALEZ 10 % SHARE F. Han amendment provides for an 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)

Page 2 of 3

ALSSe000001H

| The date of each amendment(s) adoption: 02/04/2010                                    |                     |  |  |
|---|---------------------|--|--|
| Effective date if applicable:   | 02/04/2010          | (date of adoption is required)   |  |
| Enterare can in apparents   | (no more than 9     | 0 days after amendment file date)  |  |
| Adoption of Amendment(s)  | (CH                 | ECK ONE  |  |
| The amendment(s) was/we by the shareholders was/w                                     |                     | shareholders. The number of votes cast for the amendment(s) upproval.  |  |
|   |                     | e shareholders through voting groups. The following statemer<br>group entitled to vote separately on the amendment(s): |  |
| "The number of votes  | cast for the amend  | iment(s) was/were sufficient for approval  |  |
| by  | (voting group)      |  |  |
|   | (voting group)      |  |  |
| The amendment(s) was/we action was not required.                                      | ere adopted by the  | board of directors without shareholder action and sharebolder  |  |
| The amendment(s) was/we section was not required.                                     | ere adopted by the  | incorporators without shareholder action and shareholder   |  |
| Dated_02/0  | 04/2010<br>A        | ent of   |  |
| Signaturo   | a director treeside | ent of other officer - if directors or officers have not been  |  |
| selected, by an incorporator ~ if in the hands of a receiver, trustee, or other court |                     |  |  |
| app   | ointed fiduciary by | y that fiduciary)  |  |
|   |                     | BARBARA VALLE  |  |
|   | (Тур                | ed or printed name of person signing)  |  |
|   |                     | VICEPRESIDENT  |  |
|   | (Title of           | person signing)  |  |

Page 3 of 3

H100000035574