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Division of Corporations  
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COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ELITE MEDICAL SERVICES CENTER INC.

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2011 JAN 26 PM 3:54  
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11 JAN 25 AM 8:00  
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*Amend*  
*1-26-11*

JAN-26-2013 SAT 01:06 AM

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1/28/2011 11:54:05 AM PAGE 1/001 Fax Server

P. 002/007



January 26, 2011

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ELITE MEDICAL SERVICES CENTER INC.

5040 NW 7 STREET

SUITE 490

MIAMI, FL 33126

SUBJECT: ELITE MEDICAL SERVICES CENTER INC.

REF: P09000016274

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Sylvia Gilbert  
Regulatory Specialist II

FAX Aud. #: H11000014305  
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11 JAN 26 AM 11:3

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

**ELITE MEDICAL SERVICES CENTER INC.**

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

**P09000016274**

(Document Number of Corporation (if known))

**FILED**  
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Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

*(Principal office address **MUST BE A STREET ADDRESS**)*

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of New Registered Agent, if changing

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>	<u>Address</u>	<u>Type of Action</u>
VP	ONEL MARQUEZ	7324 MIAMI LAKES HWY ST. MIAMI LAKES, FL 33014	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:  
*(attach additional sheets, if necessary). (Be specific)*

F. If an 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)*

The date of each amendment(s) adoption: 01-18-2011

(date of adoption is required)

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

☒ The amendment(s) was/were adopted 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.

Dated 01-18-2011

Signature

Laz Rodriguez

(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)

RODRIGUEZ, LAZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)