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October 18, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ANWY MEDICAL SERVICES, CORP. 42 NW 27 AVE STE 311

MIAMI, FL 33125

SUBJECT: ANWY MEDICAL SERVICES, CORP.

REF: P09000028204

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Period after (INC) in the corporate name.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Trene Albritton Regulatory Specialist II FAX Aud. #: H10000227610 Letter Number: 010A00024588

P.O BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of



ANWY MEDICAL SERVICES, CORP. (Name of Corporation as currently filed with the Florida Dept. of State) P09000028204 (Document Number of Corporation (if known)

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

	N/A		The n
ust be distinguishable and contain ution "Corp.," "Inc.," or Co.," or to ust contain the word "chartered," "p	he designation "C	Corp," "Inc," or "	Co". A professional corporati
r new principal office address, if a al office address <u>MUST BE A STR</u> E	oplicable: IET ADDRESS)	<u>N/A</u>	
		•	
e <u>r new mailing address, if applicab</u> lling address <u>MAY BE A POST OF I</u>		.N/A	
			M884.4.4
	,		
nending the registered agent and/or registered agent and/or the new re			da, ester the hame of the
Name of New Registered Agent:	N/A		
	N/A		
	(Flat	rida street address,)
New Registered Office Address:	(230)		
New Registered Office Address:	N/A		, Florida
<u>Vew Registered Office Address</u> :	•)	(Zip Code)
Vew Registered Office Address:	•		

Page 1 of 3

. 1

<u>If amendin</u>	g the Officers and/or Directors, ent	er the title and name of each office	r/director being
(Attach add	nd title, name, and address of each (itional sheets, if necessary)	Officer and/or Director being adde	<u>d:</u>
₹	monus sieces, y necessary)		
Title	<u>Name</u>	Address	Type of Action
D	YAIMA RODRIGUEZ		
	TAIWA RODRIGUEZ	3340 SW 26 STREET	
		MIAMI. FL 33133	🖾 Kemove
			
			
			🔲 Remove
			
			[] Add
			
E. If amend	ding or adding additional Articles, c	nter change(s) here:	
(attach a	dditional sheets, if necessary). (Be :	specific)	
PLEASE	NOTE THE YAIMA RODRIGUE	Z WILL REMAIN AS PRESIDI	=NT
	NOTE THAT THE AMENDMENT		CT AN
ERROR D	ONE ON THE INITIAL REGIST	RATION	
			
		•	
			·
			
F. <u>If an ar</u>	nendment provides for an exchange	, reclassification, or cancellation o	f issued shares.
	ons for implementing the amendme	nt if not contained in the amendme	nt itself:
(y n	ot applicable, indicate N/A)		
·			
	_		
			

Page 2 of 3

The date of each amendment	(s) adoption: 04/01/09
	(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/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
The amendment(s) was/wen must be separately provide	e approved by the shareholders through voting groups. The following statement d 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	II .
<u> </u>	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_10/1	5/10
Signature	- Thirth-
sele	a director, president or other officer — if directors or officers have not been octed, by an incorporator — if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	RUBEN J. NUNEZ
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of nerson signing)

Page 3 of 3