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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
WESTVIEW MEDICAL SERVICES, INC**

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ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

WESTVIEW MEDICAL SERVICES, INC

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(PRESENT NAME)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

Directors shall now read as follows:

DELETE: HUMBERTO J. VALDES.

ADD:

LIGIA MIRANDA. (DIRECTOR)

New Registered Agent

LEIDY DIAZ

8045 NW 36 ST. SUITE 535

DORAL FL 33166

SECOND: 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, are as follows.

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THIRD: The date of each amendment's adoption: 9-29-10

FOURTH: Adoption of Amendment(s) (check one)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.☐ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately for each
voting group entitled to vote separately on each 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.Signed this 29 day of September, 20 10.

Signature

[Signature]
(By the Chairman or Vice Chairman of the directors,
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Leidy Valdes

Typed or printed name

President

Title

Having been named as registered agent and to accept service of process for the stated
corporation at the place designated in this certificate, I hereby accept the appointment as
registered agent and agree to act in this capacity.

[Signature]
Registered Agent Signature

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