# P09000066693

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | ldress)            |           |
| (Ad                     | ldress)            | ·-···     |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| . PICK-UP               | ☐ WAIT             | MAIL      |
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| (Document Number)       |                    |           |
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SECRETARY OF STATE

FILEO





#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2010

CRAIG SIZER SANOMEDICS DEVELOPMENT CORP. 80 S.W. 8 ST., SUITE 2180 MIAMI, FL 33130

SUBJECT: SANOMEDICS DEVELOPMENT CORP.

Ref. Number: P09000066693

We have received your document for SANOMEDICS DEVELOPMENT CORP. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Irene Albritton Regulatory Specialist II

Letter Number: 510A00019819

2010 AUG 30 KH &: 00

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORE   | PORATION: Sanomed                            | ics Development C  | οςρ  |  |  |
|--|--|--|--|--|--|
| DOCUMENT NU  | DOCUMENT NUMBER: P0900066693                 |  |  |  |  |
| The enclosed Artic   | les of Amendment and fee an                  | re submitted for filing.   |  |  |  |
| Please return all co   | orrespondence concerning this                | s matter to the following:   |  |  |  |
|  | C.   | ame of Contact Person  | <u>.                                    </u>   |  |  |
|  | Sanomedics                                   | Development Co<br>Firm/Company                                     | φ  |  |  |
|  | 80 S.W. 8                                    | St Suite 2180<br>Address   |  |  |  |
|  | •  | ty/ State and Zip Code  Tor future annual report notification)     |  |  |  |
| For further information concerning this matter, please call: |  |  |  |  |  |
| <u>Craig</u> Name  | Sizer<br>of Contact Person                   | at ( <u>305</u> ) <u>397 - 9</u><br>Area Code & Daytime Tel        | <b>PYO2</b> ephone Number  |  |  |
| Enclosed is a check  | for the following amount m                   | ade payable to the Florida Depar                                   | tment of State:  |  |  |
| □\$35 Filing Fee   | ☐ \$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |  |
| <u>Mailing Ad</u><br>Amendmen                                |  | Street Address Amendment Section                                   |  |  |  |

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### **Articles of Amendment**

to

### **Articles of Incorporation** of

| •  | of                          | 10, 1   |
|--|-----------------------------|---|
| Sanomedics Devel   | lopment Con                 | p. 460 100                                      |
| (Name of Corporation as curr   | ently filed with the Flori  | da Dept. of State)                              |
| 1090000666   | 13                          |   |
| (Document Nur  | nber of Corporation (if kn  | own)  |
| Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:   | 6, Florida Statutes, this I | Florida Profit Corporation adopts the following |
| A. If amending name, enter the new name o  | f the corporation:          |   |
|  |                             | The new   |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro- | e designation "Corp," "In   | nc," or "Co". A professional corporation        |
| B. Enter new principal office address, if app  | olicable:                   |   |
| (Principal office address <u>MUST BE A STREE</u>   | TADDRESS)                   |   |
|  |                             | <del></del>                                     |
|  | <del></del>                 |   |
| C. Enter new mailing address, if applicable  | <del></del>                 |   |
| (Mailing address <u>MAY BE A POST OFFI</u>   | <u>CE BOX</u> )             |   |
|  |                             |   |
|  |                             |   |
| D. If amending the registered agent and/or new registered agent and/or the new registered.   |                             | in Florida, enter the name of the               |
| **************************************   | stered office address.      |   |
| Name of New Registered Agent:  | <del></del>                 |   |
| N. B 1000  |                             |   |
| New Registered Office Address:   | (Florida street             | address)  |
|  |                             | , Florida                                       |
|  | (City)                      | (Zip Code)                                      |
| New Registered Agent's Signature, if changing  |                             |   |
| I hereby accept the appointment as registered a  | gent. I am familiar with t  | and accept the obligations of the position.     |
|  | (1)                         |   |
| S  | Signature of New Registere  | ed Agent, if changing                           |

## 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)

| <u>Titlė</u> .                      | Name  | Address   | Type of Action        |
|-------------------------------------|---|---|-----------------------|
| President                           | Abhishek Shrivastava  | 80.5.w. 8 <sup>++</sup> 5+<br>suite 2180<br>Miami, PL 33130 | ☐ Add<br>☐ Remove     |
| President                           | Gary O'Hara   | 80 5w. 8th 5th<br>Sile 2180<br>Hami, Pl 33130               | _ 🗹 Add<br>_ 🔲 Remove |
|                                     |   |   | _                     |
|                                     | ng or adding additional Articles, enter   |   |                       |
| (attach add                         | ditional sheets, if necessary). (Be specif  | ic)   |                       |
|                                     |   |   |                       |
|                                     |   |   |                       |
|                                     |   |   |                       |
|                                     |   |   |                       |
| <u>provision</u><br>( <i>if not</i> | endment provides for an exchange, reclass for implementing the amendment if not applicable, indicate N/A) |   |                       |
|                                     | N/A   |   |                       |
|                                     |   |   |                       |
|                                     |   |   |                       |
|                                     |   |   |                       |

| The date of each amendment(s                           | adoption: 7/28/10   |
|--|---|
| Dec. At . 3.4. te . It . I I                           | (date of adoption is required)  |
| Effective date <u>if applicable</u> :                  | no more than 90 days after amendment file date)   |
| · · · · · · · · · · · · · · · · · · ·                  | . '   |
| •  | •   |
| Adoption of Amendment(s)                               | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.   |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes ca                                | st for the amendment(s) was/were sufficient for approval  |
| by   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |
| (1   | oting group)  |
| The amendment(s) was/were action was not required.     | adopted by the incorporators without shareholder action and shareholder   |
| Dated  | 113/10  |
| selecte  | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary) |
|  | CRaig V. Sizek  |
|  | (Typed or printed name of person signing)   |
| • -  | CEO/Chairman  |
|  | (Title of person signing)   |