# P09000076055

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	пе)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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#### **COVER LETTER**

`TO: Amendment Section Division of Corporations

NAME OF CORPO	RPORATION: Lemus Natural Medicine, Inc		Inc	
DOCUMENT NUM	MBER: P09000076055			
The enclosed Article	es of Amendment and fee a	are submitted for filing.		
Please return all cor	respondence concerning th	is matter to the following:		
_		J. Michael Lemus	<del> </del>	
_	Lemu	s Natural Medicine, Inc		
		Time Company		
	11401	SW 40th St., Suite 120		
		71tti 655		
		iami, Florida 33165 City/ State and Zip Code	Processor VIII and the State of Contract o	
-		•		
	E-mail address: (to be use	@lemushealth.com Ed for future annual report notification)		
For further informat	ion concerning this matter,	please call:		
J. N	Michael Lemus	at ( 305 ) 66	9-9689	
Name o	of Contact Person	Area Code & Daytime Tele	phone Number	
Enclosed is a check	for the following amount n	nade payable to the Florida Departr	ment of State:	
□ \$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ade Amendment Division of O P.O. Box 63:	Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building		
Tallahassee, FL 32314			2661 Executive Center Circle	

Tallahassee, FL 32301



May 12, 2010

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

Attention: Thelma Lewis

Re: Letter number 610A00006991

Dear Mrs. Lewis:

Thanks for your help, as per our phone conversation, (I am/ we are) withdrawing The Articles of Merged presented on February 25, 2010 and requested the \$78.75 to be applied for the filling fees & certificate of Status for the two amendments enclosed. (I am/we are) filing an amendment to change corporation name Lemus Natural Medicine, Inc. to the new name Lemus Health Centers, Inc.

As the name Lemus Natural Medicine becomes available, (I am/ we are) filling an amendment to change the corporation name J.M.L. Physicians Group, Inc. to the new name Lemus Natural Medicine, Inc. Both amendment cover letters are enclosed. The total for both filling fees & Certificate of Status is \$87.50; we are enclosing a check for \$8.75 to cover the difference.

Thank you in advance for your help

Dr. J. Michael Lemus
President and Director

抑h Street, Suite 120 • Miami, FL 33165 • 305-669-9689 • e-mail: info@lemushealth.com



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 22, 2010

J. MICHAEL LEMUS LEMUS NATURAL MEDICINE INC 11401 SW 40 STREET, SUITE 120 MIAMI, FL 33165

SUBJECT: LEMUS NATURAL MEDICINE INC

Ref. Number: P09000076055

We have received your document for LEMUS NATURAL MEDICINE INC and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The merger should include the manner and basis of converting the shares of each corporation into shares, obligations, or other securities of the surviving corporation or any other corporation or, in whole or in part, into cash or other property and the manner and basis of converting rights to acquire shares of each corporation into rights to acquire shares, obligations, or other securities of the surviving or any other corporation or, in whole or in part, into cash or other property.

The document submitted merges JML Physicians Group, Inc., out of existance. They can't change their name to Lemus Natural Medicine, Inc.

Instead of filing the Articles of Merger, you may consider dissolving Lemus Natural Medicine, Inc., to make the name available for JML to use.

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) 245-6905.

Letter Number: 610A00006991

Thelma Lewis
Document Specialist Supervisor

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### **Articles of Amendment Articles of Incorporation**

1.3.3.4

	FILED
ne Inc	
the Florida Dept. of State)	2010 MAY 17 CO 1
	2010 HAY 17 P 1: 59
ion (if known)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
tes, this <i>Florida Profit Corporati</i>	
<u>n:</u>	
, Inc	The new
oration," "company," or "inco orp," "Inc," or "Co". A profess ation," or the abbreviation "P.A.	ional corporation
	the Florida Dept. of State)  ion (if known)  es, this Florida Profit Corporation:  i, Inc  poration," "company," or "inco  porp," "Inc," or "Co". A profess  ation," or the abbreviation "P.A.

N/A

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:	N/A		
New Registered Office Address:	(Florida stre	eet address)	
		, Florida	
	(City)	(Zip Code)	

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

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

## 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	<u>Address</u>	Type of Action
	N/A		Add Remove
			☐ Add ☐ Remove
	ng or adding additional Articles, ente		
N/A			
		<del></del>	
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provision	ndment provides for an exchange, re s for implementing the amendment i		
(if not N/A	applicable, indicate N/A)		
IN/M			
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The date of each amendmen	t(s) adoption: February 25, 2010
Effective date if applicable:	(date of adoption is required)  February 25, 2010
·	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemen ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Signature _	ruary 25, 2010  Sollie Dececce
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	J. Michael Lemus
	(Typed or printed name of person signing)
	President and Director
	(Title of person signing)