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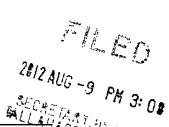
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION:	SOMA MEDICAL CENTER, P.A. #2			
DOCUMENT NUMBER:		P10000102746			
The enclosed Artic	cles of Amendment and f	ee are submitted for filing.			
Please return all co	orrespondence concerning	this matter to the following:			
		Carlos Miquel	r		
		Name of Contact Person			
	M	quel Accounting Service			
		Firm/ Company			
5100 S Dixie Hwy Ste 10					
		Address			
West Palm Beach, FL. 33405					
		City/ State and Zip Code			
	Carlos@ E-mail address: (to be	Omiquelaccounting.com used for future annual report notification)			
For further information	ation concerning this mat	ter, please call:			
	Alberto Miquel	at (561) 588-8878			
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amou	nt made payable to the Florida Department of State:			
✓ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed)	closed)		
Mailing Address		Street Address			
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



	01	Ø.,	S PM 2
SOMA MEDICA	L CENTER, P.A.	#2	FM 3: 0
(Name of Corporation as curren	tly filed with the Florid	la Dept. of State)	
P100	00102746		White .
(Document Numb	er of Corporation (if kno	own)	_
Pursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	Florida Statutes, this F	Iorida Profit Corporat	tion adopts the following
a. If amending name, enter the new name of t	he corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the d name must contain the word "chartered," "profe	esignation "Corp," "In	c," or "Co". A profes	sional corporation
B. Enter new principal office address, if applic	cable:		
Principal office address <u>MUST BE A STREET</u>			
			_
		-	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> </u>		* "
			
. If amending the registered agent and/or reg		<u>in Florida, enter the na</u>	ame of the
new registered agent and/or the new register	ered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
_		, Florid	a
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing	Registered Agent:		
hereby accept the appointment as registered age	ent. I am familiar with	and accept the obligation	ons of the position.
Sig	nature of New Registere	d 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** T Andres Florez _____ 🗖 Add □ 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 amendmen	t(s) adoption: August 1 , 2012
Effective date if applicable:	August 1, 2012 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	are approved by the shareholders through voting groups. The following statement and 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.	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
Signature ≥	2-6-2012 MUD
sele	e 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)
	Jacqueline Nunez-Florez
	(Typed or printed name of person signing)
	Vice-President (Title of person signing)
	(True or person signing)