P11000019974

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900257352019

03/04/14--01026--005 **35.00

SECREDARY OF STATE

TICS STATE

C. LEWIS MAR - 5 2014 EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Care First N	Medical Center I	nc			
DOCUMENT NUMBER: P11000019974						
	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corres	spondence concerning this mat	ter to the following:				
	David B Serrano					
•		Name of Contact Person	1			
	Care First Medica	I Center Inc				
•		Firm/ Company				
	690 E 49 St					
•	Address					
Hialeah Florida 33013						
•		City/ State and Zip Code	2			
	~	•				
into	@cfmedical.net					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	a concerning this matter, pleas	e call:				
David B Serrano		at (786	, 449-6894			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department 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)			
Mai	ling Address	Street	Address			
Ame	endment Section	Amendment Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		Clifton Building 2661 Executive Center Circle				
Tallahassee, FL 32314		∠001 E	ACCULIVE CUITET CITETE			

Tallahassee, FL 32301

APPROVED AND FILED

Articles of Amendment to Articles of Incorporation of

14 MAR -4 PM 3:41

Care First Medical Cente	er Inc.	SECRETARY OF STATE FALL SHARSET FLORIDA
(Name of Corporation as	currently filed with the Flo	orida Dept. of State)
P11000019974		
(Documen	t Number of Corporation (if I	known)
ursuant to the provisions of section 607.	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following amendme
If amending name, enter the new na	me of the corporation:	
I/A		The new
	ation "Corp," "Inc," or "C	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the A ."
. Enter new principal office address, i	f applicable:	N/A Same
Principal office address <u>MUST BE A S</u>		
Enter new mailing address, if applie (Mailing address MAY BE A POST (N/A
. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the
Name of New Registered Agent	David B Serrano	
	690 East 49th St	reet
	(Florida stree	et address)
New Registered Office Address:	Hialeah Florida	
New Registered Office Address.	(City)	(Zip Code)
New Neglisler ed Office Naturess.	(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	<mark>nanging Registered Agent:</mark> Pred agent. I appfamiliar wi	th 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Sr	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change	PTD	_	David B Serrano	690 E 49 ST	
Add				Hialeah FL 33013	
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Rепюче					
6) Change		_			
Add		_			
Remove					

E. If amending or additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Change of Directors/officers as follows:
1. David B Serrano of 690 E 49 ST Hialeah FL, 33013 shall be added as President,
Treasurer and Director of the Corporation.
2. Change in Registered Agent:
David B Serrano shall be the new Registered Agent of the Corporation at 690 E 49 ST
Hialeah FL, 33013.
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 amendment() date this document was signed.	s) adoption: February 3, 2014	14 MAR -4 PH 3:41	, if other than the
	February 3, 2014	GEORETARY OF STATE	
and the same of th	(no more than 90 d	avs after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were by the shareholders was/wer		mber of votes cast for the amendment(s)	
	approved by the shareholders through for each voting group entitled to vote	h voting groups. The following statement e separately on the amendment(s):	
"The number of votes	east for the amendment(s) was/were st	ufficient for approval	
by	(voting group)	•5	
action was not required.	adopted by the board of directors without	hout shareholder action and shareholder shareholder action and shareholder	
sel	Milled y Jenno a director, president or other officer	- if directors or officers have not been ands of a receiver, trustee, or other court	
	Mabel Y Serrano		
	(Typed or print	led name of person signing)	
	President		
	(Title o	of person signing)	•