P11000059448

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment-Section Division of Corporations

NAME OF COR	PORATION:	TU SALUE	MEDICAL CEN	NTER INC		
DOCUMENT NUMBER:			P11000059448			
The enclosed Artic	cles of Amendment an	d fee are submitt	ed for filing.			
Please return all co	orrespondence concern	ing this matter to	the following:			
		SIANIS				
		Name of Cont	act Person			
TU SALUD MEDICAL CENTER INC						
Firm/ Company						
5040 NW 7 ST SUITE 630						
Address						
		MIAMI FL	. 33126			
		City/ State and	l Zip Code			
	E-mail address: (to	be used for future a	annual report notification	n)		
For further inform	ation concerning this r	natter, please cal	l:			
	SIANIS CRUZ	at (305	5054801		
Name of Contact Person			Area Code & Daytime	Telephone Number		
Enclosed is a chec	k for the following am	ount made payab	le to the Florida Dep	partment of State:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Statu	is Cer	3.75 Filing Fee & rtified Copy ditional copy is enclosed	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amer Divis Clifto	et Address adment Section sion of Corporations on Building Executive Center Ci	rcle		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation FILED

	01	
TU SALUD ME	EDICAL CENTER I	NC. 2011 JUL 12 AM 10: 30
		la Dept. of State TARY OF STATE
		TALLAHASSEE, FLORID!
(Document Nur	mber of Corporation (if kno	own) * [#] *
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	Florida Profit Corporation adopts the followin
. If amending name, enter the new name o	f the corporation:	
		The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	e designation "Corp," "In	c," or "Co". A professional corporation
Enter new principal office address, if app	olicable:	
Principal office address MUST BE A STREE		
		
Enter new mailing address, if applicable	·•	
(Mailing address MAY BE A POST OFFI		
<u> </u>		
. If amending the registered agent and/or	ranistarad offica address i	in Florida, enter the name of the
new registered agent and/or the new regi		in Florida, enter the name of the
		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street	address)
<u> </u>	(1 10) 144 111 1001	
		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changi	ng Dogistored Agents	
hereby accept the appointment as registered a		and accept the obligations of the position
y	o	and accept the congenions of the position.
S	Signature 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)

<u>Title</u>	Name	Address	Type of Action
P	SIANIS CRUZ	6650 MILLER DR APT 9 MIAMI FL 33155	
<u>P</u>	ZAIN RODRIGUEZ	5040 NW 7 ST SUITE 630 MIAMI FL 33126	
	ding or adding additional Articles, endditional sheets, if necessary). (Be s		
provisi	mendment provides for an exchange ions for implementing the amendment applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: <u>07</u>	7/05/2011
Effective date if applicable:		(date of adoption is required)
	(no more than 9	0 days after amendment file date)
Adoption of Amendment(s)	(СН	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		te shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen-	dment(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
Dated_07/0 . Signature	5/2011	
(By	a director, presid	ent or other officer – if directors or officers have not been
sele	cted, by an incom	porator – if in the hands of a receiver, trustee, or other court
арр	ointed fiduciary b	by that fiduciary)
		SIANIS CRUZ
	(Тур	ped or printed name of person signing)
		PRESIDENT
1	(Title of	f person signing)