# P12000008564

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Amend Min. 14

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: POWER G MEDICAL CENTER CORP DOCUMENT NUMBER: P12000008664 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: OSVALDO AVILA Name of Contact Person POWER G MEDICAL CENTER CORP Firm/ Company 14411 COMMERCE WAY # 305 Address MIAMI LAKES, FLORIDA 33015 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 356-4232 Area Code & Daytime Telephone Number OSVALDO AVILA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

### **Mailing Address**

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

### Street Address

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

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

13 DEC 26 PH 12: 10

# POWER G MEDICAL CENTER CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P12000008564 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: OSVALDO AVILA Name of New Registered Agent 14411 COMMERCE WAY # 305 (Florida street address) Florida 33015 MIAMI LAKES New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Lam 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)

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.

Example: X Change	<u>PT</u> <u>]</u>	John Doe			
X Remove	<u>v</u> <u>1</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	PT	ANNELIS GARROTE	14411 COMMERCE WAY		
Add		•	SUITE 305		
Remove			MIAMI LAKES, FL 33016		
2) Change	<u>P</u>	OSVALDO AVILA	14411 COMMERCE WAY		
Add			SUITE 305		
Remove			MIAMI LAKES, FL 33016		
3) Change					
Add					
Remove					
4) Change		444-4			
Add					
Remove					
5) Change	**** <u>*****</u>				
Add					
Remove					
6) Change					
Add					
Remove					

ttach addition	adding additional Articles, ento al sheets, if necessary). (Be spe	cific)	
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an amendme	nt provides for an exchange, re	lassification, or cance	llation of issued shares,
<u>provisions to:</u> if not api	implementing the amendment i	I not contained in the	amendment itself:
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The date of each amendment(s) adoption: 12/18/2013		
date this document was signed.		
Effective date if applicable:	01/01/2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	•
	approved by the shareholders through voting groups. The following statement of 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/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated_DEC	EMBER 18, 2013	
Signature	Ayuk .	
(B)	rector, 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)	
	ANNELIS GARROTE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	