# P/2000/4599

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### **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: UROLOGIA MEDICA CORP DOCUMENT NUMBER: P12000014599 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOSE PEREZ Name of Contact Person JP GLOBAL BUSINESS SOLUTIONS Firm/ Company 7325 NW 36TH ST Address MIAMI, FL 33166 City/ State and Zip Code JOSE.PEREZ@DANIELAHART.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 436-0093

Area Code & Daytime Telephone Number JOSE PEREZ 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)

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

(Additional Copy is enclosed)

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

# UROLOGIA MEDICA CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

## P12000014500

F12000014599			<b>Q</b> 2
(Document Numb	er of Corporation (if known	1)	
Pursuant to the provisions of section 607.1006, Flas Articles of Incorporation:	lorida Statutes, this <i>Florida</i>	Profit Corporation ado	pts the following amendr
. If amending name, enter the new name of the	he corporation:		
			The ne
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "(vord "chartered," "professional association," or	Corp," "Inc," or "Co". A	ompany," or "incorpord 1 professional corporati	nted" or the abbreviation on name must contain t
Enter new principal office address, if applic			
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> </u>		
			<del></del>
. If amending the registered agent and/or reg	gistered office address in I	Iorida, enter the name	of the
new registered agent and/or the new registe	ered office address:		
Name of New Registered Agent			
-			
	(Florida street addr	ess)	
New Registered Office Address:	(City)	, Florida	(Zip Code)
	(=,,,,		(zip cout)
New Registered Agent's Signature, if changing hereby accept the appointment as registered age	Registered Agent:	d accept the obligations	of the negition
merety accept the appointment as registered age	om. 1 am jamular wun and	i accept the obligations (	у те роѕшоп.
B.	of New Paristoned Asset is	C 1 :	

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	AKINARI SHIOZAWA	4201 OAK CIRCLE
Add			SUITE #42
X Remove			BOCA RATON, FL 33431
2) Change	Р	MARTHA RESTREPO	4201 OAK CIRCLE
X			SUITE #42
Remove			BOCA RATON, FL 33431
3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f 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)		ing or adding addi Iditional sheets, if n	necessary). (E	le specific)	<del></del>		
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The date of each amendment(s) a	doption: 09/05/12
Effective date if applicable: 09	/05/12
meetive date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	AKINARI SHIOZAWA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)