P12000049937

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COVER LETTER

TO: Amendment Section Division of Corporations

ScanTroniv	Modical Imagina	Panijaaa Ina	
NAME OF CORPORATION: ScanTronix Medical Imaging Services, Inc.			
DOCUMENT NUMBER: P12000049	931		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Lee Ann M. M	artin		
	Name of Contact Person	n	
ScanTronix Mo	edical Imaging	Services, Inc.	
	Firm/ Company		
2710 Del Prad	lo Blvd S, Suit	e 2-274	
***************************************	Address		
Cape Coral, F	L 33904		
	City/ State and Zip Cod	e	
daybrk17@gmail.	.com		
	sed for future annual report	notification)	
For further information concerning this matter, plea	se call:		
Lee Ann M. Martin	_{at (} 239	, 850-4730	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 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	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building (xecutive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation

ScanTronix Medical Imaging Services, Inc.

P12000049937	s currently filed with the Florida Dep	t. of State)
	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
N/A		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co". A pr	any," or "incorporated" or the abbreviation of the contain the
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if applia (Mailing address MAY BE A POST)		
D. If amending the registered agent an		ida, enter the name of the
new registered agent and/or the new	• "	
Name of New Registered Agent	Robert G. Martin	
	2710 Del Prado Blvd S, S	
New Registered Office Address:	Cape Coral	Florida 33904
<u>New Registered Office Address:</u>	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if c		cept the obligations of the position.

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>Joh</u> ı	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	Patrick M. O'Grady	2231 NE 35th Court
Add			Lighthouse Point, FL 33064
Remove			
2) Change	PTCE	Robert G. Martin	2710 Del Prado Blvd S
Add			Suite 2-274
Remove			Cape Coral, FL 33904
3) Change	VSCF(Lee Ann M. Martin	2710 Del Prado Blvd S
Add			Suite 2-274
Remove			Cape Coral, FL 33904
4) Change	 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	-
——————————————————————————————————————	
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)	
N/A	

The date of each amendment(s) adoption: June 30, 2014	, if other than the
date this document was signed.	
Effective date if applicable:	<u></u>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_June 30, 2014	
Signature Lawrence Company of the Co	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Lee Ann M. Martin	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	